## N9800003313

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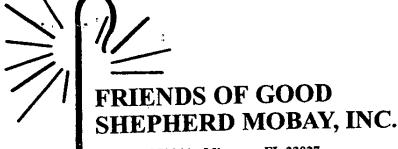


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MAY 0 7 2013 T. ROBERTS



P.O. Box 278844 • Miramar, FL 33027 Tel: (954) 441-9886 • Fax: (954) 443-4330 E-Mail: fofgoodshepherd@aol.com Website: www.fogsmobay.org

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Friends of Good Shepherd Mobay, Inc.

Name of Corporation

DOCUMENT NUMBER: N8000003313

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marie Buteau

Name of Contact Person

Friends of Good Shepherd Mobay, Inc.

Firm/Company

P.O. Box 278844

Address

Miramar, FL 33027

City/State and Zip Code

fofgoodshepherd@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marie Buteau

.,305`

331-8203

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:** 

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Street Address:** 

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

## \* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chang	ovisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of Florida ochange its registered office or registered agent, or both, in the State of Florida.
1. The name of the	e corporation: Friends of Good Shepherd Mobay, Inc.
2. The principal of	fice address: 3881 SW 144 Terrace, Miramar, FL 33027
3. The mailing add	dress (if different): P.O. Box 278844, Miramar, FL 33027
4. Date of incorpor	ration/qualification: June 9, 1998 Document number: N98000003313
	treet address of the current registered agent and registered office on file with the nent of State: (If resigned, enter resigned)  David T Price, Esq.  Deerfield Beach, FL 33442  treet address of the new registered agent (if changed) and /or registered office
<u></u>	David T Price, Esq.
5	550 S.W. 12th Ave.
	Deerfield Beach, FL 33442
6. The name and so (if changed):	treet address of the new registered agent (if changed) and /or registered office
<u></u>	David T. Price, Esq.
6	6401 Lyons Rd.
(	P.O. Box NOT acceptable Coconut Creek, FL 33073
_	· · · · · · · · · · · · · · · · · · ·
The street address as changed will be	s of its registered office and the street address of the business office of its registered agent, e identical.
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Marie	Buteau  of an officer or director  Marie Buteau  Printed or typed name and title
I hereby accept th I further agree to performance of m	ne appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete y duties, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I at the corporation has been notified in writing of this change.
Manual Storial	ture of Registered Agent  A-24-13 Date
If signing on beha	•
Type	ad or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*