Current Pri 334 NE 1ST AV DELRAY BEAC			032313	6614CC
Current Ma	iling Address:			
334 NE 1ST DELRAY BE	AVE EACH, FL 33444 US			
FEI Number: 20-0531069		Certificate of Status Desired: No		
Name and A	Address of Current Registered Agent:			
MUIR, KRISTIN 334 NE 1ST AV DELRAY BEAC				
The above name	d entity submits this statement for the purpose of changing its regi	istered office or regis	stered agent, or both, in the State of Fl	orida.
	d entity submits this statement for the purpose of changing its regi E: KRISTIN MUIR	istered office or regis	stered agent, or both, in the State of Fl	orida. 01/23/2023
		istered office or regis	stered agent, or both, in the State of Fl	
SIGNATURI	E: KRISTIN MUIR	istered office or regis	stered agent, or both, in the State of Fl	01/23/2023
SIGNATURI	E: KRISTIN MUIR Electronic Signature of Registered Agent	istered office or regis	stered agent, or both, in the State of Fl	01/23/2023
SIGNATURI Officer/Dire	E: KRISTIN MUIR Electronic Signature of Registered Agent			01/23/2023
SIGNATURI Officer/Dire	E: KRISTIN MUIR Electronic Signature of Registered Agent	Title	TREASURER	01/23/2023
SIGNATURI Officer/Dire Title Name	E: KRISTIN MUIR Electronic Signature of Registered Agent ector Detail : PRESIDENT MUIR, ROBIN C 334 NE 1ST AVE	Title Name	TREASURER MUIR, KRISTIN M 334 NE 1ST AVE	01/23/2023
SIGNATURI Officer/Dire Title Name Address	E: KRISTIN MUIR Electronic Signature of Registered Agent ector Detail : PRESIDENT MUIR, ROBIN C 334 NE 1ST AVE	Title Name Address	TREASURER MUIR, KRISTIN M 334 NE 1ST AVE	01/23/2023
SIGNATURI Officer/Dire Title Name Address City-State-Zip:	E: KRISTIN MUIR Electronic Signature of Registered Agent Cotor Detail : PRESIDENT MUIR, ROBIN C 334 NE 1ST AVE DELRAY BEACH FL 33444	Title Name Address	TREASURER MUIR, KRISTIN M 334 NE 1ST AVE	01/23/2023
SIGNATURI Officer/Dire Title Name Address City-State-Zip: Title	E: KRISTIN MUIR Electronic Signature of Registered Agent Cotor Detail : PRESIDENT MUIR, ROBIN C 334 NE 1ST AVE DELRAY BEACH FL 33444 SECRETARY	Title Name Address	TREASURER MUIR, KRISTIN M 334 NE 1ST AVE	01/23/2023

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KRISTIN MUIR

TREASURER

01/23/2023

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N03000011012

Entity Name: THE ROBERT MUIR FAMILY FOUNDATION, INC.

FILED Jan 23, 2023 Secretary of State 0323136614CC

Date