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.

DP

#### SIGNATURE: ROGER MILLER

Electronic Signature of Signing Officer/Director Detail

**Officer/Director Detail :** DP Title Title DT Name MILLER, IRVING Name GERSTEN, SHERRI Address 2601 BISCAYNE BLVD. Address City-State-Zip: MIAMI FL City-State-Zip: MIAMI FL Title DS

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

### **Current Mailing Address:** 2601 BISCAYNE BLVD.

**Current Principal Place of Business:** 

DOCUMENT# N06309

2601 BISCAYNE BLVD. MIAMI, FL 33137

MIAMI. FL 33137

## FEI Number: 59-2469316

# Name and Address of Current Registered Agent:

RODRIGUEZ, ANTONIO 2601 BISCAYNE BLVD MIAMI, FL 33137 US

SIGNATURE:

Name

Address

City-State-Zip:

Entity Name: SHIRLEY L. MILLER CHARITABLE FOUNDATION, INC.

## FILED Mar 16, 2013 Secretary of State CC5645128709

Certificate of Status Desired: No

2601 BISCAYNE BLVD

03/16/2013

Date

Date

MILLER, MICHELLE

MIAMI FL

2601 BISCAYNE BLVD

Electronic Signature of Registered Agent