

State of Florida

Department of State

I certify from the records of this office that I _____ is a corporation organized under the laws of the State of Florida, filed on _____

The document number of this corporation is _____

I further certify that said corporation has paid all fees due this office through December 31, 2016, that its most recent annual report/uniform business report was filed on _____ and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the _____,*



Ken Peterson
Secretary of State

Tracking Number: _____

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED

DOCUMENT#

Entity Name:

Secretary of State

Current Principal Place of Business:

Current Mailing Address:

JACKSONVILLE

FEI Number:

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JACKSONVILLE

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.

SIGNATURE:

Electronic Signature of Registered Agent

_____, 2016
Date

Officer/Director Detail :

Title TP
Name F
Address
City-State-Zip:

Title
Name
Address
City-State-Zip:

Title
Name
Address
City-State-Zip:

Title
Name
Address
City-State-Zip:

Title
Name
Address
City-State-Zip:

Title
Name
Address
City-State-Zip:

Title
Name
Address
City-State-Zip:

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:

CHIEF FINANCIAL OFFICER

Electronic Signature of Signing Officer/Director Detail

_____, 2016
Date