N09247

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ACCOUNT NO. : 072100000032
REFERENCE : 321946 7264302
AUTHORIZATION :
COST LIMIT: \$ 35 topicia light
ORDER DATE: November 14, 2003
ORDER TIME : 9:57 AM
ORDER NO. : 321946-180
CUSTOMER NO: 7264302
CUSTOMER: Ms. Cynthia M. Lewin Volunteers Of America, Inc. 1660 Duke Street
Alexandria, VA 22314
CHANGE OF AGENT
NAME: DADE COUNTY VOA ELDERLY HOUSING, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Carla E. Lohi EXT# 2932
EXAMINER:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

change is submi	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stated for a corporation organized under the laws of the State of Florida gistered office or registered agent, or both, in the State of Florida.	ntutes, this statement ofin order	
1. The name of t	the corporation: DADE COUNTY VOA ELDERLY HOUSING, INC.		
2. The principal	office address: 1765 West 42nd Place, Hialeah, FL 33012	·	
3. The mailing a	address (if different): VOA National Services, 1660 Duke Street,	Alexandria, VA	
4. Date of incorp	poration/qualification: May 13, 1985 Document number: N09247		
	d street address of the current registered agent and registered office on file with runent of State:	the	
	CT Corporation System	<u></u>	
	1200 South Pine Island Road		
	Plantation, FL 33324		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporation Service Company			
		SECRETARY OF STA	
	(P.O. Box or personal mailbox NOT acceptable)	LORN	
	Tallahassee, FL 32301		
The street addre	ress of its registered office and the street address of the business office of its e identical.	registered agent, as	
Such change we the board, or th	vas authorized by resolution duly adopted by its board of directors or by an one corporation has been notified in writing of the change.	officer so authorized by	
Laura R. Dunlap, Attorney in Fact (Signature of an officer or dure from (Printed or typed name and title)			
I hereby accept I further agree duties, and I an being filed mer been notified in	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp m familiar with and accept the obligation of my position as registered agent, rely to reflect a change in the registered office address, I hereby confirm than m writing of this change.	olete performance of my Or, if this document is t the corporation has	
	Service Company	1	
	(Signature of Registered Agent) (Dat	re)	
If signing on be		e Lohi e President	
	(Typed or Printed Name) (Capaci	city)	

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