

F19 000002786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

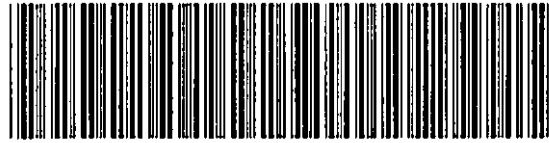
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700339007997

01/10/20-161023--011 **35.00

DEPARTMENT OF STATE
DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA

2020 JAN 10 AM 7:18

FILED

FEB 08 2020
S. YOUNG



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: January 8, 2020

Order#: 094314-010

Re: ALLIANCE FOR WELLNESS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.
XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.
XX Issue Proof of Filing.
XX Please return evidence to the following:

Attn: Meghan Groom
c/o Corporation Service Company
251 Little Falls Drive
Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of CA in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: ALLIANCE FOR WELLNESS, INC.
2. The principal office address: 14860 ROSCOE BLVD., STE 200 PANORAMO, CA 91402
3. The mailing address (if different):
4. Date of incorporation/qualification: 06/05/2019 Document number: F19000002786

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CLARKE, PHILIP
1505 N FLORIDA AVE
TAMPA, FL 33602

FILED
2020 JAN 10 AM 7:18
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company
1201 Hays Street
Tallahassee FL 32301
P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or director

Timothy Welke, COO
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company
By: Signature of Registered Agent

01/08/2020 Date

If signing on behalf of an entity:

Grace E. Kirby, Asst. Vice President
Typed or Printed Name

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