P15000031412

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COVER LETTER *

TO: Amendment Section Division of Corporations
SUBJECT: Practical Life Strategies loc. Name of Corporation
DOCUMENT NUMBER: P1500031412
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ashley Cox Name of Contact Person Practical Life Strategies Inc. Firm/Company 49354 SW 27th Torrace Address Fort Lauterdale FL 33218
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Λ
AShley Cox at (974) 471-5675 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Practical Life Strategies Inc.
2. The principal office address: 4936A SN 27th Terrace
TOA Lauredale, FL 33312
3. The mailing address (if different):
4. Date of incorporation/qualification: 410 2015 Document number: 415000031413
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)
United States Corporation Agents Inc.
13302 Winding Oak Court A
Tampa FL 33612
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Ashlen Cox
4935A SW 27th Tenrace
Fort Lauderdale, FL 33318
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 Ashley (x) Director 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.
Signifure of Registered Agent Signifure of Registered Agent
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)