#### 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. 03/20/2014

MR.

#### SIGNATURE: KEVIN COURT

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# N1100008052 Entity Name: IT ALL WORKS OUT INCORPORATED

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# **Current Principal Place of Business:**

8201 SW 193 STREET MIAMI, FL 33157

## **Current Mailing Address:**

8201 SW 193 STREET MIAMI. FL 33157

## FEI Number: 45-3076687

## Name and Address of Current Registered Agent:

COURT, KEVIN C 8201 SW 193 STREET MIAMI, FL 33157 US

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:

## Officer/

Title	Р	Title	VP
Name	COURT, KEVIN C	Name	COURT, MAIDA P
Address	8201 SW 193 STREET	Address	8201 SW 193 STREET
City-State-Zip:	MIAMI FL 33157	City-State-Zip:	MIAMI FL 33157

	Electronic Signature of Registered Agent			
Director Detail :				
	Р	Title	VP	
	COURT, KEVIN C	Name	COURT, MAIDA P	
	8201 SW 193 STREET	Address	8201 SW 193 STREET	

Certificate of Status Desired: No

FILED Mar 20, 2014 Secretary of State CC1973345379

Date

Date