DOCUMENT# N12000001820

Entity Name: ELEV8HOPE INC.

## **Current Principal Place of Business:**

3700 SE SALERNO RD SUITE B STUART, FL 34997

## **Current Mailing Address:**

1399 SE LEGACY COVE CIRCLE STUART, FL 34997 US

## FEI Number: 90-0806545

## Name and Address of Current Registered Agent:

SHPIRUK, RINA 1399 SE LEGACY COVE CIRCLE STUART, FL 34997 US FILED Apr 28, 2022 Secretary of State 4408867832CC

Certificate of Status Desired: No

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                 | E RINA SHPIRUK                           |                 | 04/28/2                    | 022 |
|---------------------------|--|-----------------|----------------------------|-----|
|                           | Electronic Signature of Registered Agent |                 | Date                       |     |
| Officer/Director Detail : |  |                 |                            |     |
| Title                     | CEO                                      | Title           | DIRECTOR                   |     |
| Name                      | SHPIRUK, RINA                            | Name            | SHPIRUK, DEVON             |     |
| Address                   | 1399 SE LEGACY COVE CIRCLE               | Address         | 1399 SE LEGACY COVE CIRCLE |     |
| City-State-Zip:           | STUART FL 34997                          | City-State-Zip: | STUART FL 34997            |     |
| Title                     | DIRECTOR                                 | Title           | DIRECTOR                   |     |
| Name                      | SHPIRUK, TREVOR                          | Name            | SHPIRUK, MITCHELL          |     |
| Address                   | 1399 SE LEGACY COVE CIRCLE               | Address         | 1399 SE LEGACY COVE CIRCLE |     |
| City-State-Zip:           | STUART FL 34997                          | City-State-Zip: | STUART FL 34997            |     |
| Title                     | DIRECTOR                                 | Title           | PRESIDENT                  |     |
| Name                      | VAUGHN, MEGHAN                           | Name            | DEL TORO, PETER            |     |
| Address                   | 3700 SE SALERNO RD                       | Address         | 3700 SE SALERNO RD         |     |
| City-State-Zip:           | STUART FL 34997                          | City-State-Zip: | STUART FL 34997            |     |
| Title                     | DIRECTOR                                 | Title           | TREASURER                  |     |
| Name                      | UHL, JACLYN                              | Name            | PHIFER, LYSSA MARIE        |     |
| Address                   | 3700 SE SALERNO RD                       | Address         | 133 SE ASHLEY OAKS WAY     |     |
| City-State-Zip:           | PALM CITY FL 34997                       | City-State-Zip: | STUART FL 34997            |     |

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.

CEO

Electronic Signature of Signing Officer/Director Detail