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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P00000076899

Entity Name: DADE COMPREHENSIVE SUPPORT, INC.

Current Principal Place of Business:

6547 SW 116 PL UNIT F MIAMI, FL 33173

Current Mailing Address:

6547 F SW 116 PLACE MIAMI, FL 33173

FEI Number: 65-1033365

Name and Address of Current Registered Agent:

MONTPELLIER, OLGI M 6547-F SW 116 PLACE MIAMI, FL 33173 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PT	Title	SECRETARY, VP	
Name	MONTPELLIER, OLGI M	Name	NUNEZ, DECEMBER C	
Address	6547-F S.W. 116 PLACE	Address	6547-F S.W. 116 PLACE	
City-State-Zip:	MIAMI FL 33173	City-State-Zip:	MIAMI FL 33173	

PRESIDENT

FILED Mar 11, 2020 Secretary of State 9767281835CC

Date

Certificate of Status Desired: No

03/11/2020

Date