#### 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.

#### SIGNATURE: DANA IVES

Electronic Signature of Signing Officer/Director Detail

Entity Name: IVES INDEPENDENT LIVING, INC.

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

2764 57 STREET NORTH ST. PETERSBURG. FL 33710

## **Current Mailing Address:**

2764 57 STREET NORTH ST. PETERSBURG. FL 33710 US

# Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

RAMSBURG, D.P. 5836 54 AVENUE NORTH SAINT PETERSBURG, FL 33709 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/Director Detail :** Title Ρ Title S Name IVES, DANA Name IVES, SHAY L Address 2764 57 STREET NORTH Address 2764 57 STREET NORTH City-State-Zip: ST. PETERSBURG FL 33710

FEI Number: 20-0712723

FILED Apr 25, 2021 Secretary of State 0768988049CC

Certificate of Status Desired: No

City-State-Zip: ST. PETERSBURG FL 33710

PRESIDENT

04/25/2021 Date

Date