| Name and Address of Current Registered Agent: | | | | |
|--|--|-----------------|---------------------------|------------|
| RAMOS, NOEL KEVIN L 870 NORTHEAST 143RD STREET NORTH MIAMI, FL 33161 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 | : NOEL KEVIN L. RAMOS | | | 04/02/2016 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | CCEO | Title | PCFO | |
| Name | MOORE, MORNEQUE N | Name | RAMOS, NOEL KEVIN | |
| Address | 870 NORTHEAST 143RD STREET | Address | 870 NORTHEAST 143RD STREE | т |
| City-State-Zip: | NORTH MIAMI FL 33161 | City-State-Zip: | NORTH MIAMI FL 33161 | |
| Title | D | | | |
| Name | RAMOS, NOEL KEVIN | | | |
| Address | 870 NORTHEAST 143RD STREET | | | |
| City-State-Zin | NORTH MIAMI EL 33161 | | | |

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: NOEL KEVIN RAMOS

Electronic Signature of Signing Officer/Director Detail

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P1000086308

Entity Name: FAMILY UNLIMITED, INCORPORATED

Current Principal Place of Business:

870 NORTHEAST 143RD STREET NORTH MIAMI, FL 33161

Current Mailing Address:

870 NORTHEAST 143RD STREET NORTH MIAMI. FL 33161 US

FEI Number: 27-3885530

Na

City-State-Zip: NORTH MIAMI FL 33161

PRESIDENT

04/02/2016

Date

FILED Apr 02, 2016 Secretary of State CC3559567484

Certificate of Status Desired: No