

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000011269

Entity Name: BUTTERFLY CARE PROVIDER INC.

Current Principal Place of Business:

10645 APHRODITE LOOP
308
NEW PORT RICHEY, FL 34654

Current Mailing Address:

10645 APHRODITE LOOP
308
NEW PORT RICHEY, FL 34654

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBLES, JENNY
10645 APHRODITE LOOP
UNIT 308
NEW PORT RICHEY, FL 34654 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

Date

Officer/Director Detail :

Title VP
Name ROBLES, JENNY
Address 10645 APHRODITE LOOP UNIT 308
City-State-Zip: NEW PORT RICHEY FL 34654

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: JENNY ROBLES

VP

04/08/2015

Electronic Signature of Signing Officer/Director Detail

Date