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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Girls Place, Inc.

Name of Corporation

DOCUMENT NUMBER: 765828

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing,

Please return all correspondence concerning this matter to the following:

Christi Arrington

Name of Contact Person

Girls Place, Inc

Firm/Company

2101 NW 39 Avenue

Address

Gainesville, FL 32605

City/State and Zip Code

christi@girlsplace.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christi Arrington

,352

373-4475

Name of Contact Person

Area Code & Davtime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is submitted for a corpor	02, 617,0502, 607,1508, or 617,1508, Florida Statutes, this ration organized under the laws of the State of Florida ce or registered agent, or both, in the State of Florida.
1. The name of the corporation: Girls Place	ce, Inc.
2. The principal office address: 2101 NW	39 Avenue Gainesville, FL 32605
3. The mailing address (if different): N/A	
4. Date of incorporation/qualification: 11/1	9/1982
5. The name and street address of the current Florida Department of State: (If resigned, or	registered agent and registered office on file with the enter resigned)
Janna Magette - res	signed
2101 NW 39 Avenu	e
Gainesville, FL 326	05 = 36 =
6. The name and street address of the new reg (if changed):	gistered agent (if changed) and /or registered office \$550 PH Fig. 1
Christi Arrington	
2101 NW 39 Avenu	e 🚆 📜
Gainesville, FL 326	
The street address of its registered office an as changed will be identical.	d the street address of the business office of its registered agent,
Such change was authorized by resolution d authorized by the board, or the corporation l	uly adopted by its board of directors or by an officer so has been notified in writing of the change.
Kint Famile Signature of an officer or director	Kristen Farrell, President
performance of my duties, and I ain familian	s of all statutes relative to the proper and complete with and accept the obligation of my position as registered wely to reflect a change in the registered office address. I
Signature of Registered Agent	10/23/2017 Date
If signing on behalf of an entity:	Date
Christi Arrington	
Typed or Printed Name	

* * * FILING FEE: \$35.00 * * *