

File 000000933

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: hr-haven, inc.

Name of Corporation

DOCUMENT NUMBER: F16000000933

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:

Belinda Waggoner

Name of Contact Person

hr-haven, inc.

Firm/Company

7201 W 129th St, Ste 105

Address

Overland Park, KS 66213

City/State and Zip Code

dinadavis@hr-haven.com

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

For further information concerning this matter, please call:

Belinda Waggoner

Name of Contact Person

at 913 940-5391

Area Code & Daytime 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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: hr-haven, inc.
2. The principal office address: 7201 W 129th St, Ste 105 Overland Park, KS 66213
3. The mailing address (if different): same
4. Date of incorporation/qualification: 2/29/16 Document number: F16000000933
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Shelley Young

9128 Strada Place, #10115

Naples, FL 34108

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Nancee Martin

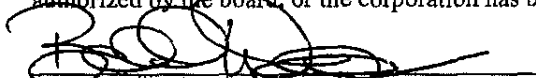
9128 Strada Place, #10115

P.O. Box NOT acceptable

Naples, FL 34108

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

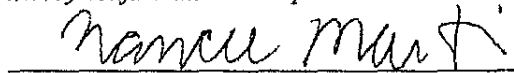
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Belinda Waggoner, President

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

July 26, 2016
Date

If signing on behalf of an entity:

Typed or Printed Name

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA