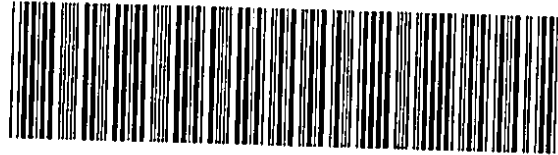


H66464

(Requestor's Name)

(Address)



300305012973

Sender's Name Skilley Phone 727 447-4999

Company GEORGE G PAPPAS PA

Address 1822 N BELCHER RD STE 200

City CLEARWATER State FL ZIP 33765-1400

10/30/17--01037--025 \$470.00

(Business Entity Name)

(Document Number)

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MA-110

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Little Scholars School Inc.  
2. The principal office address: 2671 Sunset Point Rd., Clearwater, FL 33759

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 07/15/1985 Document number: H66464

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)

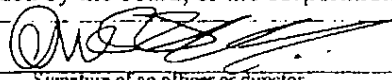
Stephen W. MacDonald  
348 Hamilton Ave.  
Safety Harbor, FL 34695

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

Sonal Kachhi  
2671 Sunset Point Rd.  
P.O. Box NOT acceptable  
Safety Harbor, FL 33759


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

Sonal Kacchi, 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

10/27/2017

\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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