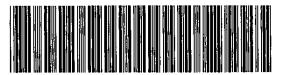
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AMERICAS HEATH FIRST LLC Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
William Taylor Mulker, Name of Person
Americas Health First LLC Firm/Company
1100 Park Central Blud S. ste. 2420 Address
Pompand Beach FL, 3300e4 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
William TAYLOR Nulket at (954) 599-6475
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Control of Corporations Clifton Building Division of Corporations

Enclosed is a check for the following amount:

\$25 Filing Fee

Tallahassee, Florida 32301

□ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: AMEVICOUS HEALTH FIVST LLC
2. (a) 100 Park Central Blvd S. Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) 1100 Park Central Blvd S. Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Ste. 2420 Ste. 2420
Pompano Beach FL 33064 Pompano Bch, FL 33064
3. Date of filing/registration in Florida 4. Document number
5. (a) Registered Agent Solutions Inc. Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 155 Office Plaza Dr. Ste. A Tallahassee ,FL 32301 (b) William Taylor Mulkey Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Office Address: 1100 Park Central BIVd. S. Sfe. 2420
Pompano Beach, FL 33064
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signee 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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a chapte in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change
Signature of Registered Agent
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

FILING FEE: \$25.00