

215 000 089188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

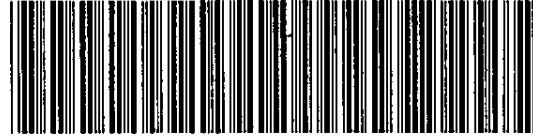
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000276163170

08/19/15--01005--021 \*\*25.00

FILED  
15 AUG 19 PM 1:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 20 2015  
J SHIVER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** New Chapter Sober Living  
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:

STACY KERN

Name of Person

NEW CHAPTER SOBER LIVING

Firm/Company

378 NORTHLAKE BLVD STE 410

Address

NORTH PALM BEACH, FL 33408

City/State and Zip Code

NEWCHAPTERSOBER@GMAIL.COM

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

For further information concerning this matter, please call:

STACY KERN at ( 954 ) 914-2990  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$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: New Chapter Sober Living

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

300 WEST 37TH STREET

378 NORTHLAKE BLVD STE 410

RIVIERA BEACH, FL 33404

NORTH PALM BEACH, FL 33408

05/20/2015

L15000089189

3. \_\_\_\_\_ Date of filing/registration in Florida 4. \_\_\_\_\_ Document number

5. (a) Stacy Kern

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

300 WEST 37TH STREET

RIVIERA BEACH, FL 33404

(b) NORTHWEST REGISTERED AGENT LLC

Enter name of NEW Registered Agent and/or NEW Registered Office address:

3030 N. Rocky Point Drive, STE 150A

NEW Registered Office Address:

Tampa, FL 33607

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.

Stacy Kern  
Signature of a member or authorized representative of a member

STACY KERN

Printed or typed name of signer

*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 change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Tom Glover Tom Glover -Assistant Secretary  
Signature of Registered Agent