5000 203 088

(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:					



700418859587

2023 DEC -7 PH 12: 2 7023 DEC -7 AM 10: 04





Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 12/7/2023	-	⇔WALK IN**
ENTITY NAME LAKE	HELEN DAY CARE, LLC	<u></u>
DOCUMENT NUMBER_		
	PLEASE FILE THE ATTACHED AND RETUR	PN
<u>xxxxxxx</u>	Plain Copy Certified Copy Certificate of Status	
æ.	PLEASE OBTAIN THE FOLLOWING FOR THE ABOV	VE ENTITY**
	Certified Copy of Arts & Amendments Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATI	TON
COUNTRY OF DESTINA NUMBER OF CERTIFICA		
TOTAL OWED \$25	<u> </u>	#: 120160000072 R H//
Please call lina at i	the above number for any issues or concerns.	I hank you so much!

COVER LETTER

Proceedings Composition Corporations	
LAKE HELEN DAY CARE, LLC SUBJECT:	
Name Name	e of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Name of Person	
Harbor Compliance	
Firm/Company	
1830 Colonial Village Lane	
Address	
Lancaster, PA 17601	
City/State and Zip Code	
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this matter, p	please call:
P Bryson	717 946-9467
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following:	amount:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

A ...

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. Na	ame of the limited liability company: LAKE HELEN	DAY CA	RE, LLC	
2. (a)		(b)	
, ,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	650 SOUTH LAKEVIEW		7335 Rive	er Road
	LAKE HELEN, FL 32744		Conestog	a. PA 17516
	12/03/2015		1.15000203	3088
3.	Date of filing/registration in Florida	— 4.		Document number
5. (a)				
. (a)	Registered Agent and Registered Office shown on the records o	f the Floric	la Dept. of Sta	_ de:
	MCFALL, DAN E			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u></u>	20
	650 SOUTH LAKEVIEW	2023 C		
	LAKE HELEN , F	32744	-	6.5 6.5
		•		
(b)				
	Enter name of NEW Registered Agent and/or NEW Registere	d Office a	<u>ddress</u> :	F:: 12: 2:
				. 27
	NEW Registered Office Address:			_
	7901 4th St N Ste 300			
				_
	St. Petersburg, F	33702		
change agent v was/w the art	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	ie registe liability of of the li e limited	red office at company, it mited liabili	is hereby confirmed that the change(s) aty company or as otherwise provided in impany.
Sign:	Beverly Steudler dure of a member or authorized representative of a member		veriy incum	Printed or typed name of signee
Lhere provis the obe to mer	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, l d'in writing of this change.	gree to ac e perform ed for in t hereby c	et in this cap nance of my Chapter 60 confirm thai	pacity. I fiather agree to comply with the
	David Roberts ire of Registered Agent			
Signati	ire of Registered Agent			