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Division of Corporations



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Division of Corporations Fax Number : (850)617-6383

From:

Account Name	:	REGISTERED AGENTS	INC.
Account Number	:	120090000081	
Phone	:	(307)200-2803	
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LLC REGISTERED AGENT CHANGE RAY OF HOPE HOME CARE SERVICES LLC

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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.

(a)		(b)			
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited (<u>Note: MAY BE POST</u>		
	07/30/18		000181411		
	Date of filing/registration in Florida	4.	Document number		_
(a)	WILLIAMS, DIANA				
	Registered Agent and Registered Office shown on the records of		t. of State:		
(,	Registered Office Address (MUST BE FLORIDA STREET)		t. of State:		
	Registered Office Address (<u>MUST BE FLORIDA STREET</u> 2314 S. CRYSTAL LAKE DRIVE	ADDRESS)	t. of State:	2023 JI - Alexa	
	Registered Office Address (<u>MUST BE FLORIDA STREET</u> 2314 S. CRYSTAL LAKE DRIVE		t. of State:	2023 JUN 2 Sucreta: Sal Cahas	
	Registered Office Address (<u>MUST BE FLORIDA STREET</u> 2314 S. CRYSTAL LAKE DRIVE	ADDRESS)	t. of State:	2023 JUN 23	
	Registered Office Address (<u>MUST BE FLORIDA STREET</u> 2314 S. CRYSTAL LAKE DRIVE LAKELAND	<u>ADDRESS)</u> 33801		4 1 1	
	Registered Office Address (<u>MUST BE FLORIDA STREET</u> 2314 S. CRYSTAL LAKE DRIVE LAKELAND	<u>ADDRESS)</u> 33801		PH 12: COF STA	
	Registered Office Address (MUST BE FLORIDA STREET) 2314 S. CRYSTAL LAKE DRIVE LAKELAND . F1 Northwest Registered Agent LLC Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	<u>ADDRESS)</u> 33801		PH 12: 1	
(b)	Registered Office Address (MUST BE FLORIDA STREET) 2314 S. CRYSTAL LAKE DRIVE LAKELAND . F1 Northwest Registered Agent LLC Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 7901 4th St N	<u>ADDRESS)</u> 33801		PH 12: COF STA	

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.

STRUTH 25

Nat Smith

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

Taylor Newman - Assistant Secretary

Signature of Registered Agent

Division of Corporations P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00