6/21/23, 4:21 PM

Division of Corporations

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(((H23000222173 3)))



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To:

Division of Corporations

Email Address:_

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)389-0502

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE KIDDO CARE LLC

Certificate of Status	0
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Page Count	02
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Electronic Filing Menu

Corporate Filing Menu

Help

T. LEMIEUX

JUN 2 3 2023

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: KIDDO CARE 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:
Cheyenne Moseley
Name of Person
Legalzoom.com, Inc.
Firm/Company
101 N. Brand Blvd., 11th Floor
Address
Giendale, CA 91203
City/State and Zip Code
tiffanylmitchell7@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Cheyenne Moseley 800 773-0888 ext 9724
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
NHS18 (2/14)

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. N	ame of the limited liability company:	AHE	LLU							
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 300 S Austrailian Ave Unit 718									
	West Palm Beach, Florida 33401			ılm Beach, Florida 3	<u></u>					
	03/29/2023	-	L2300015	57408						
3.	Date of filing/registration in Florida	4.	 	Document number	·					
5. (a)	Registered Agent and Registered Office shown on the records of the UNITED STATES CORPORATION AGENTS Registered Office Address ### CHUST BE FLORIDA STREET A. 476 Riverside Ave.	, INC.	<u></u>	::						
	Jacksonville , FL	32202			2023 .					
(b)	Enter name of NEW Registered Agent and/or NEW Registered Confirmation Mitchell NEW Registered Office Address: 300 S Austrailian Ave Unit 718			: : : : : : :	, 22 PH 2: 25					
	West Palm Beach , FL	33401								
the cha agent was/w the art	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative vote of the members of icles of organization or the operating agreement of the I	the regise bility confither the limited l	stered office impany, it is ited liability	e and the business office is hereby confirmed that by company or as otherwipany.	e of the registered the change(s)					
I here provis the ob- to mer notifie	ture of a member of authorized representative of a member by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I h d in writing of this change. Tiffany Mit	ee to act perform for in C ereby co		Printed or typed name of si	-					
, aignan	ire of Registard Agent									