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08/18/24

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Touch the Heart, Reach the Soul, 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:	
Maria Painter Name of Person	
Touch the Heart, Reach the Soul	
132 V. Matt Williams Address	
POLK CITY FL 33868 City/State and Zip Code	
touch the hoartreach the soul Egmail. Con E-mail address: (to be used for future annual report notification))
For further information concerning this matter, please call:	
Maria Painter at (616) 309-3153 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 & Certified Copy	
INHS18 (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. Na	ame of the limited liability company: Touch the Heart, Reach the Soul LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	POLK city FL 33868 PULK city, FL 33868
	L2300()465473
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Republic Registered Agent LLC Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	1150 NW 72nd Are Tower I suite 455
	Milmi, FL 33126
(b)	MANIM Painter Enter name of NEW Registered Agent and/or NEW Registered Office address:
	132 V. Matt Williams Blvd. NEW Registered Office Address: Blvd. NEW Registered Office Address:
	TATE FL
	POLK City , FL 33868
the cha agent v was/we the arti	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after inge or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cless of organization or the operating agreement of the limited liability company. The following the followi
provisi the obl to mere	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.

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