

N13000000

3190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

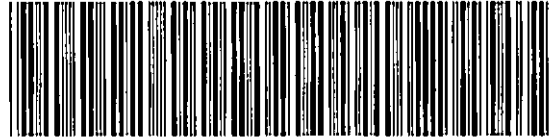
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
20 MAY -5 AM 10:49

MAY 22 2020

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GRACEFUL WARRIOR ADVOCATES INC

Name of Corporation

DOCUMENT NUMBER: N13000003190

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sudie Norman

Name of Contact Person

GRACEFUL WARRIOR ADVOCATE NP LLC

Firm/Company

2945 Lakeside Villa Road

Address

Orange Park, FL 32073

City/State and Zip Code

gracefulwarrioradvocate@hotmail.com

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

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For further information concerning this matter, please call:

Sudie Norman

Name of Contact Person

at (904) 579-3377

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GRACEFUL WARRIOR ADVOCATES INC chged to "Graceful Warrior Advocate NP LLC
2. The principal office address: 2945 LAKESIDE VILLA ROAD ORANGE PARK, FL 32073
3. The mailing address (if different): See completed: "Articles of Conversion for "Other Business Entity" into Florida LLC
4. Date of incorporation/qualification: 04/04/2013 Document number: N13000003190
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

NORMAN, SUDIE L

2945 LAKESIDE VILLA RD

ORANGE PARK, FL 32073

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Registered Agents Inc.

7901 4th St N STE 300

P.O. Box NOT acceptable

St. Petersburg FL 33702

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Sudie Norman

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Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

04/28/2020

Date

If signing on behalf of an entity:

Bill Havre

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314