

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tree of Life's Mission of Love, INC
Name of Corporation

DOCUMENT NUMBER: N1600000 2844

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:

Kaleen Richards
Name of Contact Person

Firm/Company

1010 Arthur Ave
Address

Orlando, FL 32804
City/State and Zip Code

Kaleenr@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kaleen Richards at (407) 929 6599
Name of Contact Person 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: Tree of Life's Mission of Love
2. The principal office address: 1010 Arthur Ave Orlando, FL 32804
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/16/16 Document number: N1600000 2844
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)

United States Corporation Agents
5575 S. Semoran Blvd
Suite 36 Orlando, FL 32822

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

Kaleen Richards
1010 Arthur Ave
P.O. Box NOT acceptable
Orlando, FL 32804

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2019 NOV 22 PM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Kaleen Richards
Signature of an officer or director

Kaleen Richards Director
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.

Kaleen Richards
Signature of Registered Agent

11/19/19
Date

If signing on behalf of an entity:

Typed or Printed Name

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