Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (813)436-5206

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

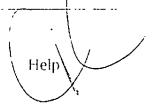
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REGISTERED AGENT CHANGE LONGEVITY INTERVENTION FULFILLMENT & ELDER RESOURCE

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu



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

statement of cha	nge is submitted for a corporation	n 0,0502, 607,1508, or 617,1508, 1401 n organized under the laws of the State r registered agent, or both, in the State	e of FL					
1. The name of t	the corporation: LONGEVITY IN F	ERVENTION FULFILLMENT & ELDER F	RESOURCE CENTER, INC.					
	office address:							
3. The mailing a	ddress (if different):							
4. Date of incorp	oration/qualification: 03/16/2022	Document number: N22	2000002609					
	I street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on fi tesigned)	le with the					
6. The name and (if changed):	I street address of the new register	ed agent (if changed) and /or registere	2024 FEB 16 SEGRETALLAHAS					
	7901 4th St N STE 300 P.O. Box NOT acceptable							
	St. Petersburg FL 33702							
_		e street address of the business office adopted by its board of directors or b seen notified in writing of the change						
Chair	tasker 1 Lauren	Christopher Harvey, President						
I hereby accept I further agree to if my duties, an locument is bei	the appointment as registered as o comply with the provisions of d I am familiar with and accept t	gent and agree to act in this capacity, all statutes relative to the proper and the obligation of my position as regis ge in the registered office address, I l	L'complete performance stered agent. Or, if this					
7- N-		02/15/2024						
Sign	nature of Registered Agent	Date						
If signing on be	half of an entity:							
Taylor Newman		_						
l y	eped or Printed Name							