Savers Requester's Name 825 Blanton Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy ■ Walk in Pick up time Photocopy ☐ Will wait ☐ Mail out Certificate of Status **AMENDMENTS NEW FILINGS** ☐ Profit Resignation of R.A., Officer/Director ☐ Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/QUALIFICATION **OTHER FILINGS** ☐ Foreign Annual Report Limited Partnership Fictitious Name Reinstatement Trademark Other **Examiner's Initials** CR2E031(7/97)



Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of <u>FLORIDA</u> submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: WIFE SAVERS CLEANING SERVICE INC
2. The mailing address of the corporation: 3/826 BLANTON LANE TAVARES FL 32728
3. Date of incorporation/qualification: 5-82000 Document number: P0000046532
4. The name and address of the current registered agent and office:
RUBESS RANPURA
24140 m11/5 ave
LEESBURG FL 34788
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)
CAROL SLAUTER
31826 BLANTON LANE
TAVARES FL 32778
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.
(Signature of an officer, chairman of vice chairman of the board) (Date)
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
ara (2 8-30-2061
(Signature of Registered Agent) (Date) If signing on behalf of an entity:
It signing on behalf of an entity: CAROL SLAUTER PRESIDENT (Typed or Printed Name) (Capacity)
(Typed or Printed Name) (Capacity)
* * * DIT INC DDD. 025 00 + + +

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