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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MS Supply & Home Health Co.

Name of Corporation

DOCUMENT NUMBER:

P02000003509

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:

John Patrick

Name of Contact Person

Tampa Bay Business Consultants, LLC

Firm/Company

401 E Fern Street

Address

Tampa, FL 33604

City/State and Zip Code

john@tampabaybusinessconsultants.com

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

For further information concerning this matter, please call:

Manuel Santos

,813

521-2001

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: MS Supply & Home Health Co.	
2. The principal office address: 618 Ware Blvd., Tampa, FL 33619	
3. The mailing address (if different): PO Box 2642, Brandon, FL 33509	
4. Date of incorporation/qualification: 01/01/2002 Document number: P02000003509	
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)	
LDL Firm	
606 E Madison St	
Tampa, FL 33602	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Tampa Bay Business Consultants, LLC	4
401 E Fern Street	9
Tampa, FL 33604	
The street address of its registered office and the street address of the business office of its registered agen as changed will be identical.	ŧt,
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.	
Manuel A. Santos 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 Registered men 10/01/2019	
If signing on behalf of an entity:	
John Patrick	
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