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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Thomas Group Home, Inc

Name of Corporation

**DOCUMENT NUMBER:** 

202000004521

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:

**CAROL THOMAS** 

Name of Contact Person

THOMAS GROUP HOME, INC

Firm/Company

3625-27 NW 187 ST

Address

MIAMI/FL 33056

City/State and Zip Code

TJ806@YMAIL.COM

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

For further information concerning this matter, please call:

CAROL THOMAS

<sub>..</sub>754 422

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

statement of change is submitted for a corporation organized under the laws of the State of Fl in order to change its registered office or registered agent, or both, in the State of Flo	orida
1. The name of the corporation: Thomas Group Home, Inc	
2. The principal office address: 3625-27 NW 187 St  Miami, FL 33056	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 01/14/2002 Document number: P02000	004521
5. The name and street address of the current registered agent and registered office on file with Florida Department of State: (If resigned, enter resigned)	the .
Carol Thomas	
3801 N University Dr. #505	SECRET TALL AUG
Sunrise, FL 33351	
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed):	မ္ ြ
CAROL THOMAS	ATE RIDA 59
3625-27 NW 187 STREET	
P.O. Box NOT acceptable	
MIAMI, FL 33056	
The street address of its registered office and the street address of the business office of its ras changed will be identical.	egistered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an off authorized by the board, or the corporation has been notified in writing of the change.	ficer so
Carol Thomas	
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 compl performance of my duties, and I am familiar with and accept the obligation of my position a agent. Or, if this document is being filed merely to reflect a change in the registered office a hereby confirm that the corporation has been notified in writing of this change.	ete s registered address, I
08/07/2015	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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