

PO2000125420

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**CAPITOL
SERVICES**

**Statement of Change of Registered Office
or Registered Agent or Both for
Corporations**

Capitol Corporate Services, Inc.
PO Box 1831
Austin, TX 78767
Phone: 800-345-4647 Fax: 800-432-3622
regagent@capitol-services.com

**Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

DATE: 11/30/2015
STATE: FLORIDA
REP UNIT: ALICE, INC.

Enclosed for filing please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above referenced name, which is to be filed in your office. Enclosed is check #26846 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Change of Agent Section of the Registered Agent Department.

Should you need to return this document for any reason please send it to:

Capitol Corporate Services, Inc.
PO Box 1831
Austin, TX 78767

15 DEC -3 AM 11:43

Capitol Corporate Services, Inc.
Registered Agent Services



13-463711

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: ALICE, INC.
2. The principal office address: 19101 Mystic Pointe Drive, Spt. 1501
Aventura, FL 33180
3. The mailing address (if different): 1919 Oxmoor Rd, No. 248
Homewood, AL 35209
4. Date of incorporation/qualification: 11/25/2002 Document number: P02000125420

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)

Mark E. Rousso

3440 Hollywood Blvd., Ste. 360

Street Address

Hollywood

FL

33021

City

State

Zip Code

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

Capitol Corporate Services, Inc.

155 Office Plaza Drive, Suite A

Street Address

Tallahassee

FL

32301

City

State

Zip Code

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.

[Signature]
Signature of an officer or director

Vice President
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]
Signature of Registered Agent

11-30-15
Date