P04000016965

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Division of Corporations
SUBJECT: Philishas Family Child Care Inc. (Name of Corporation)
DOCUMENT NUMBER: P0400016965
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:
Philisha Knighta (Name of Contact Person)
Philisha
Philisha (Firm/Company) 1611 W.12 th Street
(Address)
(Address)
Riviera Beach, F1- 33419 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Philisha Knighten (Name of Contact Person) at (SO1) 207-1280 (Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Amendment Section

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 Flonda
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Philishas Family Child Care Inc.
2. The principal office address: 1611 W. 12th Street
Riviera Beach, F1. 33419
3. The mailing address (if different): 1611 will 45.
Riview Read IFI. 33119
4. Date of incorporation/qualification: 1/22/04 Document number: Po 4000016965
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)
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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
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1219 W. 6th Street (P.O. Box NOT acceptable)
Riview Beach, F1, 33409
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.
Philisha Knighten
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.
Advicate Signature of Registered Sent) Advicate Signature of Registered Sent) Advicate Signature of Registered Sent) If signing on behalf of an entity: (Date)
alkfisaldkfi (Typed or Printed Name)

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