

P10000024528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

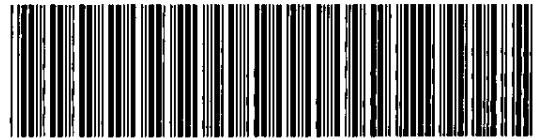
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000213509620

10/28/11--01014--010 \*\*35.00

11 OCT 28 PM 2:49

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

RALPH  
@ 10/28/11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SERVICE LIFE, INC.  
Name of Corporation

**DOCUMENT NUMBER:** P 10000024528

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:

MARIA CONSUELO ALVARADO  
Name of Contact Person

SERVICE LIFE, INC.  
Firm/Company

3840 NW 122 TERRA  
Address

SUNRISE, FL. 33323  
City/State and Zip Code

SERVICElifealvarado@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIA CONSUELO ALVARADO at ( 754 ) 551-12-70  
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: SERVICE LIFE Inc.
2. The principal office address: 3840 NW 122 TERRA SURPRISE, FL 33323
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/19/10 Document number: P10000024528
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)

~~RICARDO ALVARADO~~ (RICARDO ALVARADO)  
13470 NW 2nd Manor Unit 103  
Plantation, FL 33325

FILED STATE  
SECRETARY OF CORPORATIONS  
11 OCT 28 PM 2:49

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

MARIA CONSUELO ALVARADO (new registered Agent)

P.O. Box NOT acceptable

13470 NW 2nd Manor Unit. 103 Plantation, FL 33325

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

MARIA CONSUELO ALVARADO  
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

10/24/2011  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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  
CR2E045 (8/05)