# P100000 42281

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#### COVER LETTER

TO: Amendment Section Division of Corporations

TLC Home Care Services of CFL, Inc. dba FirstLight HomeCare

Name of Corporation

P10000042281 and G10000046440

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:

#### Tamahra luso

Name of Contact Person

TLC Home Care Services of CFL, Inc. dba FirstLight HomeCare

Firm/Company

101 Timberlachen Circle - Suite 102

Address

Lake Mary, FL 32746

City/State and Zip Code

### tiuso@firstlighthomecare.com

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

For further information concerning this matter, please call:

Tamahra luso

Name of Contact Person

7 878-1296
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 cha	inge is submitted for a corporation organized under the laws of the State of Florida		
<ol> <li>The name of</li> <li>The principal</li> </ol>	the corporation: TLC Home Care Services of Central FL, Inc. office address: 101 Timberlachen Circle - Suite 102		
<del></del>	ddress (if different):		
4. Date of incorn	poration/qualification: 5/20/2010 Document number: P10000042281 and	G100000	46440
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)		<del></del>
	Tamahra luso, CEO/President		
	801 International Pkwy - Suite 5026		
	Lake Mary, FL 32746	12	SEC
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	AUG 20	PETAR
	Tamahra luso, CEO/President	) PH	
	101 Timberlachen Cir - Suite 102	ယ္	O.E.
	P.O. Box NOT acceptable  Lake Mary, FL 32746	80	ATE RIDA
The street address changed will	ess of its registered office and the street address of the business office of its registere be identical.	d agent,	
J	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	•	
Signatu	re of an officer or director Printed or typed name and title	, coriq	leut
I further agrée : performance of	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registe is document is being filed merely to reflect a change in the registered office address, that the corporation has been notified in writing of this change.	ered , I	
Tall	nature of Revisiered Agent		
· ·			•
	half of an entity:		
1 a mah	yped or Printed Name		

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