

2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P10000065480

Entity Name: POLLY'S CARE, INC.

FILED
Jul 10, 2013
Secretary of State

Current Principal Place of Business:

9715 SPRING LAKE DRIVE
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

9715 SPRING LAKE DRIVE
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 27-3224030

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MORRIS-GRAHAM, PAULINE
9715 SPRING LAKE DRIVE
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

MORRIS, PAULINE
9715 SPRING LAKE DRIVE
CLERMONT, FL 34711 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PAULINE MORRIS

Electronic Signature of Registered Agent

07/10/2013

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: MORRIS, PAULINE
Address: 9715 SPRING LAKE DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: SEC
Name: DAY, TRISHA
Address: 9715 SPRING LAKE DRIVE
City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAULINE MORRIS

Electronic Signature of Signing Officer or Director

PRES

07/10/2013

Date