P110000036277

(Requestor's Name)
(Address)
(Address)
(radioss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Busiless Eliuty Name)
<u> </u>
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200266029512

11/03/14--01004--027 **35.00



Ba cran f

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Lap of Love International, Inc.

Name of Corporation

DOCUMENT NUMBER: P11000036277

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:

Scott P. Weber

Name of Contact Person

Scott Phillip Weber, P.A.

Firm/Company

3709 W. McKay Avenue

Address

Tampa, FL 33609

City/State and Zip Code

sheila@franchiselegalsolutions.com

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

For further information concerning this matter, please call:

Scott Weber

_{ar},813 \337-6652

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
 The name of t The principal 	the corporation: Lap of Love International, Inc. office address: 19239 N. Dale Mabry Hwy, #152, Lutz, FL 33548
3. The mailing a	nddress (if different):
4. Date of incorp	poration/qualification: 04/13/2011 Document number: P11000036277
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Christopher J. McVety - RESIGNED
	13139 W. Linebaugh Avenue, Suite 101
	Tampa, FL 33626
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Scott P. Weber
	3709 W. McKay Avenue P.O. Box NOT acceptable
	Tampa, FL 33609 P.O. Box NOT acceptable
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Signatu	Dani G. McVety, President
I hereby accept I further agree performance of agent. Or, if the hereby confirm	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 dwifes, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
_ S we	10/16/14
/ '	mature of Registered Agent Date
Scot	thalf of an entity: The weber system of Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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