## P11000085704

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Verbal Behavior Solutions, Inc

P11000085704

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:

## Name of Contact Person Firm/Company 13611 Waterfall Way Address Tampa, FL 33624

City/State and Zip Code

City/State and Zip Code

lorrainnejones@verizon.net

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

For further information concerning this matter, please call:

LorRainne Jones

Name of Contact Person

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: Verbal Behavior Solutions, Inc	
2. The principal office address: 13611 Waterfall Way Tampa, FL 33624	
3. The mailing address (if different):	_
4. Date of incorporation/qualification: Sept. 29, 2011 Document number: P11000085704	_
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)	
Corporation Service Company	
1201 Hays Street	
Tallahassee, FL 32301	3
Tallahassee, FL 32301  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  LorRainne Jones  13611 Waterfall Way	ノスがないよ
LorRainne Jones	1
	f
P.O. Box NOT acceptable  Tampa, FL 33623	
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.	
LorRainne Jones , Description 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 regislered office address, I hereby confirm that the corporation has been notified in writing of this change.  7/26/2012  Signature of Registered Agent  Date	
If signing on behalf of an entity:	
LorRainne Jones	
Typed or Printed Name	

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