## P120000000114

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	siness Entity Nan	ne)
(Do	ocument Number)	<del> </del>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

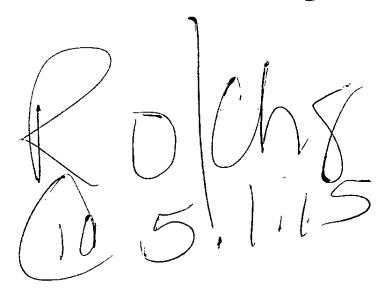
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SLORETARY OF STATE OF CORFORATION OF CORFORATION 3 30



## **COVER LETTER**

TO: Amendment Section Division of Corporations
Agnes RX Inc.
SUBJECT: Agnes RX Inc.  Name of Corporation
DOCUMENT NUMBER:
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:
Agnes Park
Name of Contact Person
Agnes Rx Inc.
Firm/Company
2800 N. MacDill Ave # C
Address
Tampa, Fl. 33607
City/State and Zip Code
info@macdillrx.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Keandra Hopkins Name of Contact Person  Name of Contact Person  at (813 ) 870-6300 Area Code & Daytime Telephone Number
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  Street Address:  Amendment Section
Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## 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.
1. The name of t	the corporation: Agnes Rx Inc.
2. The principal	office address: 2800 N. MacDill Ave. # C Tampa, Fl. 33607
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 2/29/2012 Document number: P12000020274
	d street address of the current registered agent and registered office on file with the rement of State: (If resigned, enter resigned)
	Agnes Park
	16126 Rambling Vine
	Tampa, FI 33624
6. The name and (if changed):	Agnes Park  2800 N. MacDill Ave # C  P.O. Box NOT acceptable
	Agnes Park 2
	2800 N. MacDill Ave # C
	Tampa, Fl 33607
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	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.
Signatur	Agnes Park Printed or typed name and title
I hereby accent	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 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.
Sig	MN Apr 23, 2015  Apr 23, 2015  Date
V	half of an entity:
Agi	ies Park
Ty	ped or Printed Name

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