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SHOWN OF CORPORATIONS
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: SENIOR (RANSITIONS FNC. Name of Corporation			
DOCUMENT NUMBER: 2000 47506			
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:			
Semon TRANSITIONS INC.			
Firm/Company			
9 Fernery TexiL			
Orman Bencir FL 32174 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (386) 672.3800 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.			

RECEIVED

SET 3 OCT -7 PM 4: 54

SE DEFENSION OF FORESTIONS

TALL MASSET, FINATIONS

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.
1. The name of the corporation: SENIOR TRANSITIONS TNC.
2. The principal office address: 9 FERNERY TRAIL - ORMOND BEACH, FC 32174
3. The mailing address (if different):
4. Date of incorporation/qualification: Mwy 22,20 12 Document number: D 20004758
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) RONDLO F. ANDERSON 1376. S. Rugewood Ave. Suite 11 Drypond Beach, FL 32/14
6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):
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. Ames ETERS 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 registered office address, I hereby confirm that the corporation has been notified in writing of this change. Signature of Registered Agent Date
If signing on behalf of an entity:
SENIOR TEANSITONS FIC. Typed or 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 * * *