P13000060993

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COVER LETTER

SUBJECT: Global Final Care Consultants Name of Corporation
DOCUMENT NUMBER: P1300060993
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:
Ronne McG/Jun-Berry Name of Contact Person
Global Fing Care Consaltants
5851 Holmberg Road Un. + 613
Parkland Florida 33067 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:

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

TO:

Amendment Section Division of Corporations

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: Global Final Care Consultants In
2. The principal office address: 585/ Holmberg Koad, UN. 76/3
PARKIAND Florida 33067
3. The mailing address (if different): SAA
4. Date of incorporation/qualification: 7-14-20/3 Document number: P13000060993
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)
Rome McCollum-Berry
Stays SAME (New Address
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Rome McCollum-Verry
5851 Holmberg Road Unit 613
PARKLAND, Florida 33067
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.
Meyuh Cally Ronne McGlyan-Berry Signature of an officer or dignormal Ronne McGlyan-Berry
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.
Signification of Registered Agent Porising Date
If signing on behalf of an entity:
Kenneme Berry Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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