P1600050479

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	(Requestor's Name)
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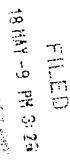
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COVER LETTER

Division of Corporations
SUBJECT: In Ain ty Care Services Inc. Name of Corporation
DOCUMENT NUMBER: P1600050479
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:
Jennifer Mueller Name of Contact Person
Infinity Care Services, Inc.
403 DURHAM SHORE CT Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jennifer Mweller at (813) 955-1645 (cell) Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Ferson Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

CR2E045 (03/12)

TO:

Amendment Section

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 FLOCIOA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Infinity Care Services INC.
2. The principal office address: 403 DURHOM SHORE CT
APOLLO BEACH, FZ 33572
3. The mailing address (if different): SAME AS A Bove -
4. Date of incorporation/qualification: 1011 2010 Document number: P10000050479
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)
Jennifer Mueller
1555 Misty Isle Lane
Riverview, FL 33579
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Jennifer Mueller
403 DURHAM SHORE CT. P.O. Box NOT acceptable
APOLLO BEACH, FL 33572
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.
Signature of an officer or director
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 Optil 10,2010
If signing on behalf of an entity:
Jenni fer Mully Typed or Printed Name

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