## P160000 66495

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2019 SEP 16 AM 7: 42

C. GOLDEN SEP 2 6 2019

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: PATHWAYS TO GROW, P.A.

Name of Corporation

DOCUMENT NUMBER: P16000066495

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:

Pathways to Grow
Firm/Company

16407 Diamond Head Dr.

Address

Weston, FL 33331

City/State and Zip Code

diana.acevedoslp@gmail.com

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

For further information concerning this matter, please call:

Diana Acevedo

Name of Contact Person

Name of Contact Person

at (954 ) 243-8767

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes a organized under the laws of the State of <mark>Florida</mark> registered agent, or both, in the State of Florida.	
1. The name of t	he corporation: Pathways To	Grow, P.A	
2. The principal	office address: 16407 Diamo	and Head Dr., Weston FL 33331	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 8/10/20	16	495
	I street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	UNITED STATES COR	RPORATION AGENTS, INC.	20
	5575 S. SEMORAN BLVDS	SUITE 36ORLANDO, FL 32822	2019 SED 16
6. The name and (if changed):	-	red agent (if changed) and /or registered office	6 AM 7:42
	Diana Acevedo		2
	16407 Diamond Head I	Dr NOT acceptable	
	Weston, FL 33331	· 	
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registe	ered agent.
Such change wa	as authorized by resolution duly a ne board, or the corporation has b	dopted by its board of directors or by an officer een notified in writing of the change.	so
Din C	te of an officer of director	Diana Acevedo, PTSD	
I hereby accept I further agree performance of agent. Or, if th	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with	gent and agree to act in this capacity. all statutes relative to the proper and complete and accept the obligation of my position as reg to reflect a change in the registered office addre	istered vss. l
Din 1	The Agent	9/12/2019	
If signing on be	half of an entity:		
Diana 1	ACCUPAO  Oped or Printed Name		

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