

P180000014902

(Requestor's Name)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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MAY 23 2018

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Loving Souls Care Services, Inc.

Name of Corporation

DOCUMENT NUMBER: P18000014902

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:

Maria Karla Fraga

Name of Contact Person

Loving Souls Care Services, Inc.

Firm/Company

12032 SW 132nd Ct, Suite 200

Address

Miami, FL 33186

City/State and Zip Code

lovingsoulscare@gmail.com

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

For further information concerning this matter, please call:

Maria Karla Fraga

Name of Contact Person

at (786) 344-4173

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**

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: Loving Souls Care Services, Inc.
2. The principal office address: 12032 SW 132nd CT, Suite 200, Miami FL 33186

3. The mailing address (if different): 12955 SW 66 Lane, Apt 8, Miami FL 33183

4. Date of incorporation/qualification: 02/13/2018 Document number: P18000014902

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)

maria K. Fraga
14051 SW 79th ST Miami FL 33183

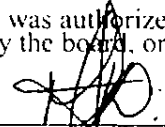
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

12032 SW 132nd CT, Suite 200, Miami FL 33186

P.O. Box NOT acceptable

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

Maria Karla Fraga

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

05/07/2018

Date

If signing on behalf of an entity:

Typed or Printed Name

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

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TALLAHASSEE, FLORIDA