

P1800000 53536

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: Laurent Group Home Inc  
Name of Corporation

DOCUMENT NUMBER: P18000053536

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:

Margarette Jean Laurent  
Name of Contact Person

Laurent Group Home  
Firm/Company

261 SW Fairchild Ave  
Address

Port St Lucie FL 34984  
City/State and Zip Code

Marglaurent91@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Margarette Jean Laurent at (954) 213-7914  
Name of Contact Person 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: Laurent Group Home Inc
- 2. The principal office address: 261 SW Fairchild Ave  
Port St Lucie, Florida 34984
- 3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: June 14 2018 Document number: P18000053536

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)

Carole Prophete  
284 Ohio Rd  
Lake Worth, FL 33467

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

Bony Jean Laurent  
261 SW Fairchild Ave  
Port St Lucie FL 34984

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TALLAHASSEE FLORIDA

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.

Margarette Jean Laurent Signature of an officer or director      Margarette Jean Laurent P 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.

Bony Jean Laurent Signature of Registered Agent      09/19/18 Date

If signing on behalf of an entity:  
\_\_\_\_\_  
Typed or Printed Name

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