P19000 000 471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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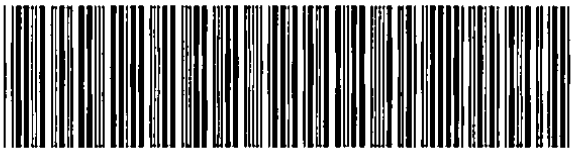

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SEC... TALLAHASSEE, FL

SEP 11 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Prescription Hope Inc.
Name of Corporation

DOCUMENT NUMBER: P19000000471

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:

Kent L. Staker
Name of Contact Person

Prescription Hope Inc.
Firm/Company

2100 SE Ocean Blvd, Ste 300
Address

Stuart, FL 34996
City/State and Zip Code

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

For further information concerning this matter, please call:

Kent L. Staker at (772) 209-2856
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

CR2E045 (03/12)

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: Prescription Hope Inc.

2. The principal office address: 2100 SE Ocean Blvd, Suite 103
Stuart, FL 34996

3. The mailing address (if different): 2100 SE Ocean Blvd, Suite 300
Stuart, FL 34996

4. Date of incorporation/qualification: 12/27/2018 Document number: P19000000471

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)

Douglas K. Pierce
2100 SE Ocean Blvd, Suite 300
Stuart, FL 34996

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

Douglas K. Pierce
2100 SE Ocean Blvd, Suite 103
P.O. Box NOT acceptable
Stuart, FL 34996

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2019 SEP -3 PM 4:42
SECRETARY OF STATE
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.

Signature of an officer or director — Douglas K. Pierce, President / CEO (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 — August 27, 2019 (Date)

If signing on behalf of an entity:

Douglas K. Pierce
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)