Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000074404 3)))



H220000744043ABCX

To:			2022 FEB
	Division of (	•	A ≥ 8
	rax number	: (850)617-6380	
From:			8 7 ASS
	Account Name	: LEGALINC CORPORATE SERVICES INC.	144.±1 <u>→</u>
	Account Numbe	er : I20180000011	S. S.
	Phone	: (844)386-0178	그를 그
	Fax Number	: (214)317-4754	ب المسلم الم

## REGISTERED AGENT CHANGE 4 OUR CHILDS CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RARCHS

MAR 0 1 2027.

I ALBRITTON

Electronic Filing Menu

Corporate Filing Menu

Help

To: 18506176380 From: 14693173436 Date: 02/25/22 Time: 2:30 PM Page: 02/02

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS (((H22000074404 3)))

statement of cl	hange is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, F tion organized under the laws of the Si e or registered agent, or both, in the Si	tate of
1. The name of	f the corporation: 4 OUR CHILD	OS CORP.	
2. The principa	al office address:		
3. The mailing	address (if different):		
4. Date of inco	orporation/qualification: 09/10/20	Document number: P	20000072675
	nd street address of the current re artment of State: (If resigned, en	egistered agent and registered office or iter resigned)	ı file with the
	REGISTERED AGENTS INC.		- •
	7901 4TH ST N, STE 300		2022 F
	ST. PETERSBURG, FL 33702		2022 FEB 28 SECRETARY TALL AHA
6. The name at (if changed)	nd street address of the new regis	stered agent (if changed) and /or regist	ered office STAT
	LEGALINC CORPORATE SE	RVICES INC.	FA =
	5237 SUMMERLIN COMMO	NS BLVD, SUITE 400	म 🐷
	FORT MYERS, FL, US, 33907	P O Box NOT acceptable	
The street add as changed wi	ress of its registered office and	the street address of the business offi	ice of its registered agent,
Such change v authorized by	was authorized by resolution du the board, or the corporation ha	ly adopted by its board of directors o as been notified in writing of the char	r by an officer so age.
LAURA	A C SANCHOZ	LAURA C SANCHEZ, Pr	
I hereby accep I further gare	of the appointment as registered	d agent and agree to act in this capac of all statutes relative to the proper o pt the obligation of my position as re ange in the registered office address, is change.	rity. and complete performance
'X	lan e	02/18/2022	
3	agnature of Registered Agent	Date	
If signing on 1	ochalf of an entity:		
ANNA MANU	JKYAN	(	((1122000074404 3)))
	Typed or Printed Name	<del></del>	

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