

P93000085116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

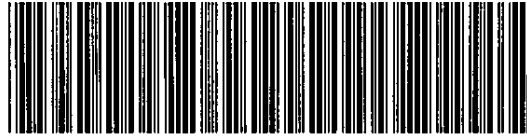
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: To change address of Golden Age Home Care, Inc
Name of Corporation

DOCUMENT NUMBER: P93000085116

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:

Nelson A Cazadilla

Name of Contact Person

Golden Age Home Care, Inc

Firm/Company

3408 W 84 ST 211

Address

HIALEAH, FL 33018

City/State and Zip Code

gahomecare@aol.com

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

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For further information concerning this matter, please call:

Nelson A Calzadilla

Name of Contact Person

at (305) 554-0009

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: Golden Age Home Care, Inc

2. The principal office address: 3408 W 84 ST 211 HIALEAH, FL 33018

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/14/1993 Document number: P93000085116

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)

CALZADILLA, NELSON

3408 WEST 8 STREET SUITE 211 HIALEAH, FL 33018

Name Changed: 08/12/2014

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

8410 W Flagler St Suite 207B

Miami, FL 33144-2000

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.

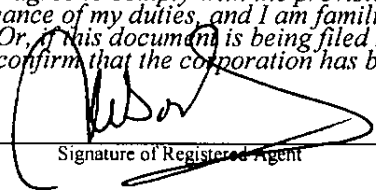
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or director

Nelson A Calzadilla (President)

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

06/08/2015

Date

If signing on behalf of an entity:

Nelson A Calzadilla

Typed or Printed Name

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