	D ST.			
TAVARES, FL	32778			
Current Mail	ing Address:			
1617 E. ALFF TAVARES, F	RED ST. FL 32778 US			
FEI Number: 80-0843624		Certificate of Status Desired: Yes		
Name and A	ddress of Current Registered Agent:			
ALLEN, PATRIC 1617 E. ALFREI				
TAVARES, FL 3	32778 US			
	32778 US entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flo	orida.
The above named		tered office or regis	tered agent, or both, in the State of Flo	orida. 03/09/2016
The above named	entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flo	
The above named SIGNATURE	entity submits this statement for the purpose of changing its regis PATRICIA ALLEN	tered office or regis	tered agent, or both, in the State of Flo	03/09/2016
The above named SIGNATURE	entity submits this statement for the purpose of changing its regis PATRICIA ALLEN Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flo	03/09/2016
The above named SIGNATURE Authorized F	entity submits this statement for the purpose of changing its regis PATRICIA ALLEN Electronic Signature of Registered Agent Person(s) Detail :			03/09/2016
The above named SIGNATURE Authorized F Title	entity submits this statement for the purpose of changing its regis PATRICIA ALLEN Electronic Signature of Registered Agent Person(s) Detail : OWNER	Title	ASSISTANT	03/09/2016

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATRICIA ALLEN

OWNER

03/09/2016

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L12000099449

Entity Name: ABUNDANT LIFE NURSING AND SUPPORTIVE SERVICES LLC

Current Principal Place of Business:

FILED Mar 09, 2016 **Secretary of State** CC9052515248

Date