

L150000 92011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

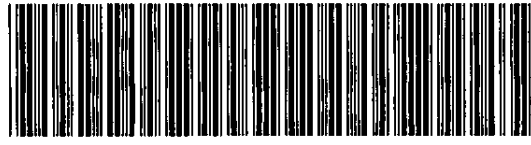
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A Reel Wise Choice LLC.
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Katherine Perez Figueroa
Name of Person

A Reel Wise Choice LLC.
Firm/Company

109 Ambersweet Way STE 520
Address

Davenport, FL 33897
City/State and Zip Code

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

For further information concerning this matter, please call:

Katherine Perez Figueroa at (407) 269-0397
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Arrel Wise Choice LLC.

2. (a) 109 Ambersweet Way (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

STE 520 _____
Davenport, FL 33897 _____

3. 5/26/15 4. L15000092011
 Date of filing/registration in Florida Document number

5. (a) Shawn Wise
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2611 Bimini Bay Cres
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Apt 303
Davenport, FL 33897

(b) Katherine Perez Figueroa
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

109 Ambersweet Way STE 520
 NEW Registered Office Address:
Davenport
Davenport, FL 33897

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Shawn Wise
 Signature of a member or authorized representative of a member

Shawn E. Wise
 Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
 Signature of Registered Agent