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## **COVER LETTER**

	gistration Section vision of Corporations	-				
SUBJECT	All Aboard the Brain Train LLC					
Name of Limited Liability Company						
Dear Sir or	Madam:					
The enclos	ed Registered Agent/Registered Office	Change and f	fee(s) are submitted for filing.			
Please retu	rn all correspondence concerning this i	natter to the f	ollowing:			
Judy Sue Ba	aum Herman					
	Name of Person		_			
All Aboard	the Brain Train LLC					
	Firm/Company		_			
227 Capri E						
	Address		_			
Delray Bead	ch, Florida, 33484					
	City/State and Zip Code		<del></del>			
judyherman	@allaboardthebraintrain.com					
E-ma	il address: (to be used for future annua	report notific	cation)			
For further	information concerning this matter, pl	ease call:				
Judy Herma	n	561 at (	542-7830			
	Name of Person	(	Area Code & Daytime Telephone Number			
Re Di P.C	ailing Address: gistration Section vision of Corporations D. Box 6327 Hahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
En	closed is a check for the following an	nount:				
	\$25 Filing Fee	□ \$5	5 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.	Na	ame of the limited liability company:  All Aboard the Bra	in Tra	ain I	LLC	
2	(a)	3908 S. Ocean Blvd		(b)	3908 S. O	ocean Blvd
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)		Mailing address of limited fiability company: (Note: MAY BE POST OFFICE BOX)
		Unit TH 1			Unit TH 1	
		Highland Beach, Florida 33487	_		Highland I	Beach, Florida 33487
		06/08/16		I	.16000111;	310
3.		Date of filing/registration in Florida	4.	_		Document number
5.	(a)	Judy Sue Herman				
	·	Registered Agent and Registered Office shown on the records of the 3908 S. Ocean Blvd	ne Flor	ida	Dept, of Stat	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			70	
		Unit TH 1				20
		Highland Beach .FL	33487			
	(b)	Judy Sue Baum Herman				2020 JUST 18 AH 10: 32
Enter name of NEW Registered Agent and/or NEW Registered Office address:						ē.
		227 Capri E				20
		NEW Registered Office Address:		-		
						_
		Delray Beach FL	33484			_
ch ag wa	ange ent v is/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egiste oility the l	erec con imit	l office an apany, it is red liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
		Just H	Ju —	dy S	Sue Baum I	
	_	thre of a member of authorized representative of a member				Printed or typed name of signee
pro the to	ovisi 2 obl merc	by accept the appointment as registered agent and agred ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I he Fin writing of this change.	e to a erfori for in ereby	ct i mar i Ch con	n this cape ice of my e iapter 605 ifirm that	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been
Si	gnatu	re of Registered Agent				