Division of Corporations Electronic Filing Cover Sheet

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Τc:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : T20010000062

Fax Number

Phone : (323)9€2-8600 : (323)962-3889

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LLC REGISTERED AGENT CHANGE SWEET MEMORIES PHOTOGRAPHY BY NAOMI PHELPS, LLC

Certificate of Status	0
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Page Count	03
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To:

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	me of the limited liability company: SWEET MEN	MORIES PHOTO	OGRAPHY BY NAOMI F	PHELPS, LLC	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited habitity company: (Note: MAY BE PQST OFFICE ROX)		
	1421 NW 14TH AVENUE	14	1421 NW 14TH AVENUE		
	BOCA RATON, FL 33486	BC	OCA RATON, FL 33	486	
	06/03/2016	L16	000111706		
3.	Date of filing/registration in Florida	4.	Document numb	per	
5. (a)					
. (")	Registered Agent and Registered Office shown on the records PHELPS-BOGUSH, NAOMI	of the Florida Dept	, of State:		
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)		TS 18	
	1421 NW 14TH AVENUE		·	ANCHE TI	
(b)	BOCA RATON,	FL_33486	33486 圣代		
	UNITED STATES CORPORATION AGEN		TANSSEE, FL		
(1/)	Enter name of NEW Registered Agent and/or NEW Register	:			
	13302 WINDING OAK COURT, SUITE A			5: 30 STATE FLORID	
	NEW Registered Office Address:			7	
	TAMPA				
	<u>TAMPA</u>	FL. 33012	·		
the cha agent v was/we the arti	inited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the membericles of organization or the operating agreement of the second or the second agreement of the second or the seco	of the registere I liability compa rs of the limited the limited liabil	d office and the busines my, it is hereby confirm liability company or as lity company.	is office of the registered lied that the change(s)	
~7.7.7.3	ture of a majober or althorized representative of a member		Printed or typed name of signer		
provisi the obs to mer notified	by accept the appointment as registered agent and tions of all statutes relative to the proper and compligations of my position as registered agent as providely reflect a change in the registered office address of in writing of this change. CIEYENNE MOSELEY, ASSISTANT SECRET STATES CORPORATION AGENTS, INC.	ete perjormance ided for in Chap , I hereby confir			