119000 145 468

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

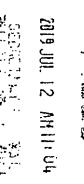
. . A

Office Use Only



600331394986

07/11/19--01006--021 **25.00



Y SULKER
JUL 19 2019

COVER LETTER

TO:	Registration Section Division of Corporations	·	
SUBJE	Living Intent, LLC		
		ne of Limited L	iability Company
Dear S	ir or Madam:		
The en-	closed Registered Agent/Registered Off	fice Change and	fee(s) are submitted for filing.
Please	return all correspondence concerning th	is matter to the	following:
Frank	: N. Lago, Esq.		
-	Name of Person		<u> </u>
Bay A	area Corporate Counsel		
_	Firm/Company		
4830	W. Kennedy Blvd. Suite 600		
	Address		_
Tamp	a, FL 33609		
	City/State and Zip Code		_
frank(@bayareacorporatecounsel.com		
Е	-mail address: (to be used for future ann	nual report notif	ication)
For fur	ther information concerning this matter.	. please call:	
Frank	N. Lago	855	521-2222
	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	Re Dir P.C	alLING ADDRESS: gistration Section vision of Corporations D. Box 6327 Hahassee, Florida 32314
	Enclosed is a check for the following	; amount:	
	■ \$25 Filing Fee	□ \$:	55 Filing Fee & Certified Copy
INHS18	3 (2/14)		

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

2. (a) Florida Liability Company	(b)
Principal office address of limited liability (Note: MUST BE STREET ADDRI	
841 Prudential Drive, 12th Floor	841 Prudential Drive, 12th Floor
Jacksonville, FL 32207	Jacksonville, FL 32207
06/10/2019	L19000145468
3. Date of filing/registration in Flor	da 4. Document number
5 (n) Bay Area Corporate Counsel	* 20
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORII	
841 Prudential Drive, 12th Floor	
Jacksonville	FL 32207
(b) Stanka Veleva	
Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	V Registered Office address:
NEW Registered Office Address:	
841 Prudential Drive, 12th Floor	
Jacksonville	FL 32207
the change or changes are made, the Florida stree agent will be identical. Or, in the case of a Florid	· · · ·
Signature of a member or authorized representative of a m	Stanka Veleva
·	ember Printed or typed name of signee ent and agree to act in this capacity. I further agree to comply with the

Ageny District Control of the Contro