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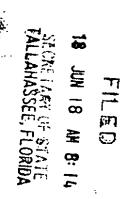
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JUN 1 8 2018



JUN 1 9 2018 S. YOUNG

COVER LETTER

то:	Registration Section Division of Corporations		* '			
SUB	JECT:					
	Nar	ne of Limited Li	ability Company			
Dear	Sir or Madam:					
The c	enclosed Registered Agent/Registered Of	fice Change and	fee(s) are submitted for fili	ing.		
Pleas	e return all correspondence concerning th	is matter to the	following:			
Eva	A Montalvo					
	Name of Person					
Nou	rish Yoga & Wellness, LLC			\$	Zes &	
	Firm/Company				A	n
137	59 Via Aurora, Apt D			٠	SSEE CO	in S
	Address		• ••		M 8: 14	
Delr	ay Beach, FL 33484			¥	A L	
-	City/State and Zip Code		_			
emo	ntalvohealthcoach@gmail.com					
	E-mail address: (to be used for future an	nual report notifi	ication)			
For fi	urther information concerning this matter	, please call:				
Eva	Montalvo	972	740-0789			
	Name of Person	at (Area Code & Daytime Te	elephone Nu	mber	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.C	gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314			
	Enclosed is a check for the following	g amount:				
	\$25 Filing Fee	□ \$5	55 Filing Fee & Certified C	ору		

INHS18 (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.

	dress of limited liability company:
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Apt D	
Delray Beach, FL 33484	
1/3/2018 L18000002122	
3. Date of filing/registration in Florida 4. Docume	ent number
5. (a) Eva Montalvo	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
1377) Via Aurora	:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	⁷ ≱: 5
Apt D	
Delray Beach , FL 33484	ASSEN IASSE
(b) Eva Montalvo	
Enter name of NEW Registered Agent and/or NEW Registered Office address:	8: 14 ORIDA
13759 Via Aurora	DA FE
NEW Registered Office Address:	
Apt D	
Delray Beach	
I hereby accept the appointment as registered agent and agree to act in this capacity. If provisions of all statutes relative to the proper and complete performance of my duties, as the obligations of my position as registered agent as provided for in Chapter 605, F.S. Of the merely reflect a change in the registered office address. I hereby confirm that the limite motified in writing of this change.	business office of the registered confirmed that the change(s) my or as otherwise provided in Un + a / vo r typed name of signee
Signature of Registered Agent	