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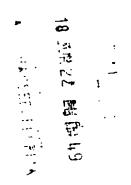
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(Address)			
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(City/State/Zip/Phone #)			
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JUN 22 2018

COVER LETTER

TO: Registration Section Division of Corporations				
·				
1. 14 h Dia . 110	-			
SUBJECT: Web Oiner, LLC Name of Limited Liability Company				
tvanc of E	mined Blaomy Company			
Dear Sir or Madam:				
The analoged Projectored Agent/Projectored Office Che	and for(a) are submitted for filing			
The enclosed Registered Agent/Registered Office Cha	ange and rec(s) are submitted for fitting.			
Please return all correspondence concerning this matter	er to the following:			
M a 11				
Matt Harpen Name of Person				
Name of Person				
(Jehn (((
Web Diter U.C. Firm/Company				
6314 Corporate CT STE 160 Address)			
Address				
Food Marco F1 33a1a				
Fort Myers, FL 33919 City/State and Zip Code				
- Chy/othle tha 21p code				
infold webding com				
E-mail address: (to be used for future annual rep	ort notification)			
For further information appearance this matter along	and.			
For further information concerning this matter, please	can:			
Muli	302 222			
Matt Harr at (at (at (at (at (303) 717-7409			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314			
Tananassee, Florida 32301				
Enclosed is a check for the following amount:				
₩ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			
= 025 1 mmg / 66	- 555 Fining 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:	her , LLC	
	6314 Corporate CT STE 160		Corporate CT STE 160
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Fort Myers, FL 33919	Fort 1	Myens, F1 33919
	<i>y</i>		<i>J</i>
	3/3/12 3/16/12		12000037469
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	(Jehi) has LLC Registered Agent and Registered Office shown on the records of	f the Florida Dept. of Star	te:
	Registered Office Address (MUST BE FLORIDA STREET)		- Cid Aldrey
	917 NE 16th Ave. #15 Ft Camberlali .FT	L 33304	= = = = = = = = = = = = = = = = = = =
			3 78 ² N
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	
	6314 Co: Parate CT STE 160		
	NEW Registered Office Address:		_ ·: · ·: · · · · · · · · · · · · · · ·
		<u> </u>	
	fort Myons	L <u> 33919</u>	_
the cha agent v was/we	imited liability company is not organized under the la ange or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited li- are authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registered offic iability company, it is of the limited liability	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
Signat	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address. It is writing of this change.	ree to act in this cap performance of my of for in Chapter 60, hereby confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accep, 5, F.S. Or, if this document is being filed the limited liability company has been
Signatu	re of Registered Agent		