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S. YOUNG

## **COVER LETTER**

Division of Corporations					
1 Line Design, LLC SUBJECT:					
	ıme of Limited L	Liability Company			
Dear Sir or Madam:					
The enclosed Registered Agent/Registered O	ffice Change and	d fee(s) are submitted for filing.			
Please return all correspondence concerning	this matter to the	following:			
Susan LaFleur					
Name of Person		<del></del>			
1 Line Design, LLC					
Firm/Company		<del></del>			
1011 SW 23rd Road			<b>≥</b> S:	ಹ	
Address		<del></del>	CARL	030	-
Miami, Florida 33129			HI ACT OF AHASSEE,	۵	111
City/State and Zip Code			, F.C.	*	
susan@onelinedesignstudio.com			);; [];;	<b>6</b> : 12	
E-mail address: (to be used for future at	nnual report noti	fication)	<b>F</b>	2	
For further information concerning this matter	er, please call:				
Susan LaFleur	215 at (	519-7953			
Name of Person	ai (	Area Code & Daytime Teleph	none Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	R D P.	egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314			
Enclosed is a check for the following	ng amount:				
<b>☑</b> \$25 Filing Fee	<b>.</b> 5	555 Filing Fee & Certified Copy			

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

Floria	la.					
1. N	ame of the limited liability company: 1 Line Desig	gn, LLC				
2. (a)	1011 SW 23rd Road, Miami, FL 33129	_ (b)	1011 SW	V 23rd Road, Miami, FL 33129		
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(-/		failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	1011 SW 23rd Road, Miami, FL 33129		1011 SW	23rd Road, Miami, FL 33129		
		<del></del>				
		<del></del>				
	07/31/2018	l	_1800018	3085		
3.	Date of filing/registration in Florida	<del></del> 4.		Document number		
5. (a	, Kendall Temotio					
J. (a	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State	:		
	Kendall Temotio					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<b>≥ ∞</b>		
	721 Hazelmoor Lane					
	Ponte Vedra	32081		· · · · · · · · · · · · · · · · · · ·		
(b)						
	Enter name of NEW Registered Agent and/or NEW Register	red Office add	ress:			
	Susan LaFleur			<b>&gt;</b>		
	NEW Registered Office Address:			•		
	1011 SW 23rd Road					
		00400				
	Miami,1	FL_33129		-		
the chagent was/w	limited liability company is not organized under the tange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street of	of the regis l liability co is of the lim he limited l	mpany, it is ited liability iability com	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.		
		Sus	an LaFleu			
	active of a member or authorized representative of a member		to alite es	Printed or typed name of signee		
the ob to me	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple oligations of my position as registered agent as provi rely reflect a change in the registered office address, ed in writing of this change.	ete perjormi ided for in (	ance oj my o Chapter 605	5. F.S. Or. if this document is being filed		

Signature of Registered Agent