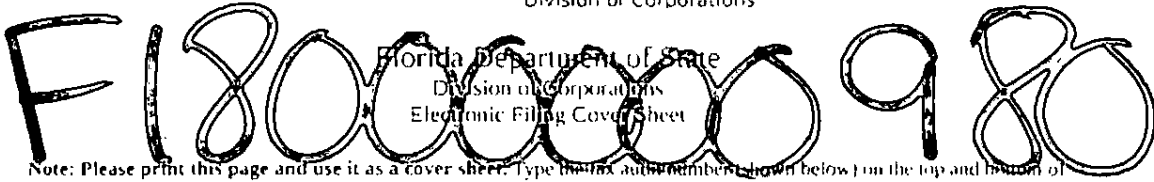


11/26/2018

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the tax authority number (shown below) on the top and bottom of all pages of the document.

((H180003354863))



H180003354863

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : REGISTERED AGENTS INC.
Account Number : 120090000081
Phone : (307)200-2893
Fax Number : (655)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

REGISTERED AGENT CHANGE
INDIGO WITH STARS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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2018 NOV 26 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FL

2018 NOV 26 PM 12:32

FILED

10/27/2018

[Handwritten signature]

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 607.0502, 607.1508, or 607.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent or both, in the State of Florida.

1. The name of the corporation: Indigo With Stars, Inc.
2. The principal office address: 10148 NW 21ST ST
PEMBROKE PINES, FL 33026-1802
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/26/2018 Document number: F18000000980
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State (If resigned, enter resigned):
LAUREL, ALICIA BAY
10148 NW 21ST ST
PEMBROKE PINES, FL 33026-1802
6. The name and street address of the new registered agent (if changed) and for registered office (if changed):
Registered Agents Inc.
3030 N. Rocky Point Dr. STE 150A
P.O. Box 5011, Jacksonville, FL 32202
Tampa FL 33607

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Alicia Bay Laurel
Signature of an officer or director

Alicia Bay Laurel
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Bill Havre
Signature of Registered Agent

03/19/18
Date

If signing on behalf of an entity

Bill Havre
Type or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 5327, TALLAHASSEE, FL 32314
(904)485-0017

2018 NOV 26 PM 12:42

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