## L00000008182

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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## **COVER LETTER**

Division of Corporations		
SUBJECT: AFFORDABLY YOURS LLC  Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
JEANNE THOMPSON  Name of Person		
A FFORDASCT YOURS LLC Firm/Company		
830 WEATHERLY Caret		
LONG-WOOD F-C 32750-7/19 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Person at (407) 314 0203  Name of Person Area Code & Daytime Telephone Number		
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303		
Enclosed is a check for the following amount:		
Sd \$25 Filing Fee □ \$55 Filing Fee & Certified Conv		

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.

1. Name of the limited liability company:A Fi-02	O AMY YOURS, LCC
2. (a)	(b)
2. (a) Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
830 WEATHERLY COURT	
LONGWOOD, FL 30750-711	14
AUC-UST 12, 2020  3. Date of filing/registration in Florida	LP\$\$\$\$\$ \$ 8182
3. Date of filing/registration in Florida	4. Document number
5. (a) CORPORATION SCRVICE COMP	71-24
Registered Agent and Registered Office shown on the records of the I	
Registered Office Address (MUST BE FLORIDA STREET ADL	DRESS)
1201 HAYS STREET	
TAUAHASSEE .FL_	32301-2525 20 THE
(b)	
JEANNE Thompson	
NEW Registered Office Address:	
830 WEATHERLY COURT	<u>~ ∑</u>
<u></u>	32750 -7119
If the limited liability company is not organized under the laws of change or changes are made, the Florida street address of the regagent will be identical. Or, in the case of a Florida limited liability was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the lim	istered office and the business office of the registered ity company, it is hereby confirmed that the change(s) is limited liability company or as otherwise provided in
Signature of a member or authorized representative of a member	JEAUNE THUMPSON
Eignature of a member or authorized representative of a member	Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent