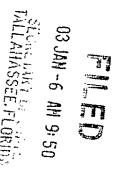
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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	<i>≠</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	** · · · · · · · · · · · · · · · · · ·
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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	Office Lice Only	· · · · · · · · · · · ·



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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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.

The name of the limited liability company is:	IN-DESIGN, LLC
2. The mailing address of the limited liability compa	
BOCA RATON, FL 3343.	,
1/16/02	L01000000859
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered Florida Department of State: Anonew FA	d office address as shown on the records of the CHUN me MOONE RD #324 ress FL 33496 e and Zip
6. The name and address of the new registered agent	
811 N. Feor. Florida street address (P. BOCA PARAFI City, State	O. Box NOT acceptable)
If the limited liability company is not organized unde confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the chat the members of the limited liability company or as of the operating agreement of the limited liability comp	the Florida street address of the registered office identical. Or, in the case of a Florida limited nge(s) was/were authorized by an affirmative vote of herwise provided in the articles of organization or
(Signature of a member or authorized representative of a member)	
Proclew Roches, Management (Printed or typed name of signee) I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability co	and agree to act in this capacity. I further agree to the proper and complete performance of my duties, my position as registered agent as provided for in to merely reflect a change in the registered office mpany has been notified in writing of this change.
(Signature of Registered Agent)	-

INHS18(10/99)