1020000 32846

(Re	questor's Name)	-
(Ad	dress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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N/K CH



2804 Gateway Oaks Drive #100 Sacramento, CA 95833

Phone (800)533-7272 Fax (800)603-5868

Kerra Childress

1264815

REFERENCE # MUST BE ON INVOICE TO BE PAID

NUMBER PAGES:

REFERENCE:

AE:

H1039

Date: March 06, 2019

Registration Section Division of

Corporations

CLIFTON BUILDING

2661 EXECUTIVE CENTER CIRCLE

TALLAHASSEE, FL 32301

FAX:

TO:

PLEASE PERFORM THE FOLLOWING:

HERE & NOW, LLC

Change of Registered Agent

IN: FL

SPECIAL INSTRUCTIONS: Please file routine. One plain copy.

PLEASE RETURN: Regular Mail

PLEASE CALL (800)533-7272 ATTN: Kerra Childress TO CONFIRM FILING RESULTS

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #100 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET (800)533-7272

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.

I. N	aine of the limited liability company:	ND NOW, L	LC	
2 (a)		(b)		
1. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability compar (Nate: MAY BE POST OFFICE BOX)	ıy:
	3321 N BUFFALO DRIVE STE 200			
	LAS VEGAS, NV 89129			
	12/09/2002		L02000032846	
3,	Date of filing/registration in Florida	4,	Document number	
5. (a)				
J. (a)	Registered Agent and Registered Office shown on the records of the	he Florida Dept.	of State:	
	T & S REGISTERED AGENTS, LLC			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		
	925 S. FEDERAL HIGHWAY STE 500		· <u>*</u>	Ô
	BOCA RATON ,FL	33431	•	I
(b)			: A1: -	
(0)	Enter name of NEW Registered Agent and/or NEW Registered (Office address:		
	Paracorp Incorporated		•	ა: ე.
	NEW Registered Office Address:		······································	ري ال
	155 Office Plaza Drive, 1st	Floor	···	
	TALLAHASSEE ,FL_	32301		
signatu Signatu hereb rovisida merej	mited liability company is not organized under the laws age or changes are made, the Florida street address of the liab identical. Or in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liab in the properties of authorized representative of a member was of all statutes relative to the proper and complete pagations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	the limited liability	y, it is hereby confirmed that the change (shilling company or as otherwise provided company. Printed or typed name of signee	(s)

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00