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AUG 0 8 2018

S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Name of Limite	ed 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:	
Brian Leung, Esq.		
Holcomb & Leung P		TALLAHA
3203 W. Cypicss St.		LED -1 PM 6: 41 SSEE, FLORID
Tanpa/FL 32307 City/State and Zip Code		: 45
E-mail address: (to be used for future annual report r	notification)	
For further information concerning this matter, please call	:	
Name of Person at ()	13) 250-50-35 Area Code & Daytime Telephoi	ne Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
□ \$25 Filing Fee	☐ \$55 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 Florida.

1. Name of the limited liability company: 6 rue healty LLC
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)
44.51 Atwood Drive 4230 5, MacDill ave Sta
Orlando, FL 32828 Tanja, FL 33611
1/31/2005 L0500009912
3. Date of filing/registration in Florida 4. Document number
5. (a) George R. James Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
4230 S. MacDill ave Ste E A B T
Tanpa Fr. 33611
(b) Brian Leung, Esa
(b) Brian Lecing, EsQ Enter name of NEW Registered Agent and/or NEW Registered Office address:
3703 W. Cypiess St. NEW Registered Office Address:
-
Tamper, Fo
Tampa FL 32367
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the articles of organization or the operating agreement of the limited liability company.
Signature of a member or authorized poresentative of a member Signature of a member 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