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SECRETARY OF STAIL DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Village Decorators LLC				
(Name	e of Limited Liability Company)			
Dear Sir or Madam:				
The enclosed Registered Agent/Register	red Office Change and fee(s) are submitted for filing.			
Please return all correspondence concer	ning this matter to the following:			
Natacha Thébaud-Verwaay				
(Name of Person)				
Village Decorators LLC	O7 JUN 19			
(Firm/Company)				
13123 SW 64th Court				
(Address)	AM II: 22			
	22 Tio			
Miami, FL 33156				
(City/State and Zip Code)				
For further information concerning this	matter, please call:			
Natacha Thébaud-Verwaay	at (305) 666-8894			
(Name of Person)	(Area Code & Daytime Telephone Number)			
, , , , , , , , , , , , , , , , , , ,				
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314			
Enclosed is a check for the foll	lowing amount:			
\$25 Filing Fee	\$55 Filing Fee & Certified Copy			

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

Pursuant to the provision liability company submits agent, or both, in the State	the following statem	6 or 608.508, Fl ent in order to c	orida Statutes, th hange its register	e undersigned limited ed office or registered
1. The name of the limited	l liability company is	Village Decorators	LLC	
2. The mailing address of	the limited liability o	ompany is : <u>1312</u>	3 SW 64th Court, Mi	ami, FL 33156
February 17, 2006		L06	000017835	,
3. Date of filing/registration	on in Florida	4.]	Document number	ſ
5. The name of the register Florida Department of S		stered office addr	ess as shown on the	he records of the
	Natacha Thébaud-\			
	0040 0181 47545 0444	Name		01VE
-	8010 SW 175th Stree	Address		SE VIS
	Miami, FL 33157	Address		
-		, State and Zip		SECRETARY IVISION OF C
6. The name and address of	f the new registered a	gent and/or office	D ;	YOF STATE SORPORALIONS
<u>1</u>	Natacha Thébaud-Ve	erwaay		
		Name		ONS 22
	13123 SW 64th Court Florida street addres		Tanantahla)	
	riorida sireet addres	s (F.O. BOX NO.	acceptable)	
<u> </u>	Miami, FL 33156	FL		<u>—–</u>
	City, S	State and Zip		
If the limited liability comp confirmed that after the cha and the business office of t liability company, it is here of the members of the limi or the operating agreement	ange or changes are not the registered agent weby confirmed that the ted liability company of the limited liability.	nade, the Florida rill be identical. (e change(s) was/v or as otherwise t	street address of the Or, in the case of a vere authorized by	he registered office Florida limited an affirmative vote
(Signature of a member or authorize	ed representative of a memb	er)		
(Printed or typed name of signee)	réboud-Ver	way		
I hereby accept the appoin comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if th address, Thereby confirm t	tment as registered a of all statutes relativ accept the obligation is document is being hat the limited liabili	gent and agree to e to the proper an is of my position filed to merely re ty company has b	o act in this capac as registered agen flect a change in t een notified in wr	ity. I further agree to mance of my duties, it as provided for in he registered office iting of this change.
(Signature of Registered Agent)				
Division	of Corporations, P. FILIN	O. Box 6327, Ta G FEE: \$25.00	llahassee, FL 32.	314

INHS18 (8/05)