## L06 0000 7062Z

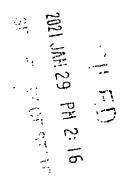
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(Ke	questor's Name)				
<del></del>					
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(City/State/Zip/Phone #)					
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(Do	cument Number)				
Certified Copies	Certificates	s of Status			
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Special Instructions to	Filing Officer:				





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3/4/2/

## **COVER LETTER**

INHS18 (2/14)

	Registration Section Division of Corporations							
SUBJE	Moisan Enterprises, LLC			•				
		Name of Limited Liability Company						
Dear Sir	or Madam:							
The encl	osed Registered Agent/Registered Of	ffice Cha	inge and	fee(s) are submitted for filing.				
Please re	eturn all correspondence concerning t	his matte	er to the	following:				
Renee M	oisan							
	Name of Person							
Moisan E	Enterprises LLC							
•	Firm/Company		•	<del></del>				
2400 Var	nderbilt Beach Rd #107							
	Address			_				
Naples, F	FL 34109							
	City/State and Zip Code			<del></del>				
гепеет@	allstate.com							
E-n	nail address: (to be used for future an	nual repo	ort notifi	cation)				
For furth	er information concerning this matter	r. please	call:					
Renee M	oisan	at (	239	597-5551				
	Name of Person	<del></del> "'\-		Area Code & Daytime Telephone Number				
F <u>L</u> F	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
F	Inclosed is a check for the following	g amoun	t:					
Ī	\$25 Filing Fee		<b>□</b> \$5	5 Filing Fee & Certified Copy				

## STATEMENT OF CHANGE OF RÉGISTERED 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.

2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)_		
24			_	address of limited liability company:  MAY BE POST OFFICE BOX
_	400 Vanderbilt Beach Rd #107	2	400 Vanderbilt E	Beach Rd #107
<u>N</u>	Japles, FL 34109		laples, FL 34109	
10	)/14/2006	LO	6000070622	
J. —	Date of filing/registration in Florida	4.	Docum	nent number
. (a) Re	enee L Moisan			
· · · —	gistered Agent and Registered Office shown on the records of	the Florida Do	pt. of State:	
R	enee L Moisan			
Re	egistered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
79	935 Airport Pulling Rd #2			
	laples	34109		
	, F1	ــــــــــــــــــــــــــــــــــــــ		
(b) Re	ence L Moisan			∷ 2
Ent	ter name of NEW Registered Agent and/or NEW Registered	Office addre	<u>88</u> 1	2021 JAN 29
D.	enee L Moisan			
				29
	EW Registered Office Address: 400 Vanderbilt Beach Rd #107			I S
	400 Vanderbiit Beach Rd #107			7 Z
NI	1	24100		. 16
	aples, FL	34109 		· ;

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