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SECRETARY OF STATE DIVISION OF CORFORATION

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Linens, Decor & More, (Name of)	LLC Limited 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:	
Alicja Fournier (Name of Person)		
Linens, Decor & More, LLC (Firm/Company)		
P.O. Box 536448		
(Address)		
Orlando, FL 32853-6448		
(City/State and Zip Code)		
For further information concerning this matt	ter, please call:	
Alicja Fournier	at (407) 965-7055	
(Name of Person)	(Area Code & Daytime Telephone 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	ng 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 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. 1. The name of the limited liability company is: Linens, Decor & More, LLC 2. The mailing address of the limited liability company is : P.O. Box 536448, Orlando FL 32853-6448 L06000082969 08/22/2006 Document number 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Alicia Fournier Name 1336 Spokane ave Address Orlando, FL 32803 City, State and Zip 6. The name and address of the new registered agent and/or office: Mark M. O'Mara, P.A. 1416 East Concord Street Florida street address (P.O. Box NOT acceptable) FL 32803 Orlando City, State and Zip 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. thember or authorized representative of a member) 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 auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. On if this document is being filed to merely reflect a change in the registered office address, thereby confirm that the limited liability company has been notified in writing of this change.

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

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