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(Re	equestor's Name)	
(***	Adoptor a Harrier	
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COVER LETTER

Registration Section Division of Corporations

TO:

INHS18 (2/14)

SUBJECT: THE WAY TO Name of I	GO LLC		
Name of I	Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.		
Please return all correspondence concerning this mat	tter to the following:		
FRANKLIN SANDS Name of Person			
THEWAYTO GOLLC W/b/a Firm/Company	LFS CONSULTING		
1046 WOODFALL CO	urt		
WESTON FL 33326 City/State and Zip Code	<u></u>		
If s consult 9540 ATT. E-mail address: (to be used for future annual re	eport notification)		
For further information concerning this matter, please call:			
FRANKLIN SANDS at Name of Person	(954) Z 60 ~ 6 Z 9 Z— 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 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 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. Na	me of the limited liability company: THE WAY TO GO LCC	
2. (a)	16170 SADDIE LANE (b) 16170 SADDIE Principal office address of limited liability company: Mailing address of limited liability	
	(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFF)	
	WESTON FL 33326 WESTON FL 3	3326_
_	13/13/2006 Date of filing/registration in Florida 4. Document number	
3.		
5. (a)	SANDS, FRANKLIN Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
	16170 SADDLE LANE Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	Registered Office Address	- Fc0
	WESTON EL 33326	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	
	1046 WOODFALL COURT	11-15 13-15
	NEW Registered Office Address:	ÿ >
	11.5000	
	WESTON ,FL 33326	
the cha agent w was/we	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed ingo or changes are made, the Florida street address of the registered office and the business office of vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the creatherized by an affirmative vote of the members of the limited liability company or as otherwise cless of organization or the operating agreement of the limited liability company.	f the registered e change(s) e provided in
Signat	Ture of a member or authorized representative of a member FRANKLIN SAN Printed or typed name of signer	<u>>></u>
I herel provision the oblit to mere notified	by accept the appointment as registered agent and agree to act in this capacity. I further agree to constant of all statutes relative to the proper and complete performance of my duties, and I am familiar vigations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documently reflect a change in the registered office address, I hereby confirm that the limited liability compared in writing of this change.	amply with the
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