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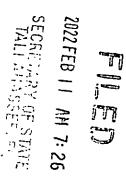
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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	All About You Women's Boutique	All About You Women's Boutique LLC Name of Limited Liability Company			
00001.					
Dear Si	r or Madam:				
The enc	closed Registered Agent/Registered C	Office Change and fe	e(s) are submitted for filing.		
Please r	return all correspondence concerning	this matter to the fo	llowing:		
Lori L.T	Fimmreek				
	Name of Person		-		
All Abo	ut You Women's Boutique LLC				
	Firm/Company		-		
4901 E :	Silver Springs Blvd Ste 505				
	Address		-		
Ocala, F	FL 34470				
	City/State and Zip Code	2			
-	cala@gmail.com				
E-	mail address: (to be used for future a	innual report notifies	ntion)		
For furt	ther information concerning this matt	er, please call:			
Lori I	Timmreck	352 at (208-0467		
	Name of Person	(Area Code & Daytime Telephone Number		
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the followi	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 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.

l. Na	ame of the limited liability company: All About You V	Women's Boutique	LLC		
2. (a)		(b)			
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability comp (Note: MAY BE POST OFFICE BO	-	
	4901 E Silver Springs Blvd Ste 505	4901	E. Silver Springs Blvd Ste 505		
	Ocala, Fl. 34470	Ocala	a. Fl. 34470		
	01/27/2022	L07000	0104341		
3.	Date of filing/registration in Florida		Document number		
5. (a)	Charla F. Griffith				
J. (u)	Registered Agent and Registered Office shown on the records of 9045 SE 35th Court, Ocala, FL 33480	f the Florida Dept. o			
	Registered Office Address (MUST BE FLORIDA STREET) 9045 SE 35th Court	ADDRESS)	SECRILIA PY OF MALLAN PAY OF M		
	Ocala	33480	一 第五 二 · · · · · · · · · · · · · · · · · ·) स्ता	
(b)	Lori L. Timmreck Enter name of NEW Registered Agent and/or NEW Registere Lori L. Timmreck	d Office address:	MM 7: 26		
	NEW Registered Office Address:				
	4901 E. Silver Springs Blvd Ste 505				
		<u> </u>			
	Ocuła, F	L			
change agent v was/we the arti	imited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the ri L. Timmreck	e registered offic iability company, of the limited lia	te and the business office of the regist t, it is hereby confirmed that the chang ability company or as otherwise provide to company.	ered ge(s)	
	ure of a member or authorized representative of a member		Printed or typed name of signee		
	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address. It in writing of this change.	ree to act in this performance of ed for in Chapter hereby confirm t		vith the d accept ng filed been	
Lori	L. Timmreck				
Signatu	re of Registered Agent				