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(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	- 1
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Office Use Only



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SECRETARY OF STATE STATE OF CORPORATIONS

J. BRYAN

SEP 1 2 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: RICHKI INVE	STMENTS LLC	
(Name of Lin	nited 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 r	natter to the following:	
NIKKI TLOTIER (Name of Person)	·	
(Name of Person)	08	
RICHKI INVESTMENTS	LLC	
(Firm/Company)		
405 SPRINGIVIEW DRIV	E	
(Address)		
SANFORD FL 32773 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, ple	ease call:	
NIKKI TROTTER at ((Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following am	ount:	
\$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. Name of the limited liability company:	CICHKI INVESTMENTS LLC
2. (a) Principal office address of limited liabilit (Note: MUST BE STREET ADDRESS	
(b) Mailing address of limited liability comp (Note: MAY BE POST OFFICE BOX)	any: PO BOX 1/18 LAKE MARY, FL 32795-/118
3. Date of filing/registration in Florida	1. Document number
5. (a) Registered Agent and Registered Office	shown on the records of the Florida Dept. of State:
Registered Agent:	BUSINESS FILINOIS INC. ?
Registered Office Address:	1203 GOVERNOR'S SA BLOD, SUITE 101 TALLAHASSEE, FL 32301-2960
NEW Registered Agent:	NIKKI TROTTER
(b) Enter name of <u>NEW Registered Agent</u> a <u>NEW Registered Agent</u> :	
NEW Registered Office Address: MUST BE FLORIDA STREET ADDR	ESS) SANFORD FL 32773
that after the change or changes are made, the El	under the laws of the State of Florida, it is hereby confirmed orida street address of the registered office and the business or, in the case of a Florida limited liability company, it is athorized by an affirmative vote of the members of the limited e articles of organization or the operating agreement of the
(Signature of a member or authorized representative of a member	1)
MIKKI A. TROTEL (Printed or typed name of signee)	
	gent and agree to act in this capacity. I further agree to e to the proper and complete performance of my duties, and I by position as registered agent as provided for in Chapter 608, oreflect a change in the registered office address, I hereby ten natified in writing of this change.

υS

(Signature of Registered Agent)

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