L10000034898

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(0	ity/State/Zip/Phone #)	· · · · · ·
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O. LEWIS
OCT 1 9 2010
EXAMINER

COVER LETTER		
TO: Registration Section		
 Division of Corporations 		
	Boutique, LLC.	
Name of Limite	ed 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:	
Marissa Shidel		
Name of Person		
La Bling Boutique, LLC. Firm/Company		
Firm/Company		
19046 Bruce B. Downs Blvd. Suite 60)	
Address		
Tompo El 22647		
Tampa, FL. 33647 City/State and Zip Code		
City/State and Zip Code		
lablingboutique@gmail.com		
E-mail address: (to be used for future annual report notificate	uon)	
For further information concerning this matter, ple	ease call:	
5 /1		
Marissa Shidel at (
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Registration Section		
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
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Enclosed is a check for the following am	ount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

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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.

agem, or voin, in the state of Ftortaa.	
1. Name of the limited liability company:	La Bling Boutique, LLC.
2. (a) Principal office address of limited liability compan	y:
(Note: MUST BE STREET ADDRESS)	19046 Bruce B. Downs Blvd. Suite 60 Tampa, FL. 33647
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	19046 Bruce B. Downs Blvd. Suite 60 Tampa, FL. 33647
03/30/2010	L10000034898
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	
Registered Agent:	Marissa A. Shidel
Registered Office Address:	3236 Grassglen Place Wesley Chapel, FL. 33544
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	19046 Bruce B. Downs Blvd. Suite 60 Tampa ,FL 33647
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization
Marissa A. Shidel Printed or typed name of signee	_
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	agree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in crely reflect a change in the registered office by has been notified in writing of this change.

Signature of Registered Agent