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J. BRYAN

APR 2 0 2009

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJ	SUBJECT: Novelia Style Group, LLC Name of Limited Liability Company			
Dear S	Sir or Madam:			
The en	nclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.		
Please	e return all correspondence concerning th	nis matter to the following:		
	C. Todd Marks, Esquire Name of Person			
	Westchase Law, P.A. Firm/Company			
	12169 W. Linebaugh Avenue Address	APR 19 AM CRETARY OF LAHASSEE, I		
<u></u>	Tampa, Florida 33626 City/State and Zip Code	STATE FLORIDA		
E-	Todd@Westchaselaw.com -mail address: (to be used for future annual report noti	fication)		
For fu	rther information concerning this matter,	, please call:		
	C. Todd Marks, Esquire  Name of Person	at ( 813 ) 490-5211  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 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.

Name of the limited liability company:	Novelia Style Group, LLC		
2. (a) Principal office address of limited liability comp	any:		
(Note: MUST BE STREET ADDRESS)	14510 Mirabelle Vista Circle Tampa, Florida 33626		
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)	14510 Mirabelle Vista Circle Tampa, Florida 33626		
4-1-10	L10000035631		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
Registered Agent:	Kristen Hilton		
Registered Office Address:	14510 Mirabelle Vista Circle 70 Tampa, Florida 33626		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	VEW Registered Office address: 75 5.		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Westchase Law, P.A. 12169 W. Linebaugh Avenue Tampa ,FL 33626		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idliability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or authorized representative of a member	e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote herwise provided in the articles of organization		
Kristen Hilton			
Printed or typed name of signee			
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.		
Signature of Registerel Agent			

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