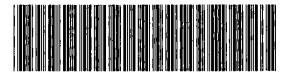
LIDODOHAGOS

·	
(Requestor's Name)	
4	
(Address)	
(Address)	
(Address)	
(Cit. (Cit (Zi - (Di (Di	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(,_,_,_,_,_,_,_,_,_,,,	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
_	

Office Use Only



800292521708

11/28/16--01008--022 **25.00

SECRETARY OF STATE

10.0

FILED

S Warren NOV 3 0 2016

COVER LETTER

Registration Section

TO:

Division of Corporations		
SUBJECT: Southern Cutting Ed Name of Limit	ge Landscaping, LLC ted 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 matter to	o the following:	
Niurka Klemencic Name of Person	<u></u>	
Southern Cutting Edge Lu Firm/Company	ndscaping, LLC	
7250 SE 120 CT Address		
Morniston Fl 32668 City/State and Zip Code		
E-mail address! (to be used for future annual report	o+ notification)	
For further information concerning this matter, please cal	li:	
Niurka Klemenac at (3	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301 Enclosed is a check for the following amount:		
•	Diagram B. A. C. Maria	
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	
UNITALA I // I 4 I		

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. Name of the limited liability company: Southern	Luthing Edge Landscaping, W
2. (a)5550 SW 130 Are	_ (b)5550 SW 130 AVE
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Southwest Ranches, Fr	Southwest Ranches Fi
<u> 33330</u>	ने ने ३ ४०
3. Date of filing/registration in Florida	4. Document number
5. (a) Niurka Klerrenac Registered Agent and Registered Office shown on the records of the	he Florida Dept. of State:
5550 SW 130 Ave Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)
Southwest Ranches	
(b) Niurka Klerner (1) Enter name of NEW Registered Agent and/or NEW Registered (1)	The P
NEW Registered Office Address:	I: 03
morriston, FL	32668
If the limited liability company is not organized under the law the change or changes are made, the Florida street address of a agent will be identical. Or, in the case of a Florida limited lial was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the light signature of a member or authorized representative of a member	the registered office and the business office of the registered bility company, it is hereby confirmed that the change(s) f the limited liability company or as otherwise provided in
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete put the obligations of my position as registered agent as provided to merely reflect a change in the registered office address, I have the provided in writing of this change.	ve to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept for in Chapter 605, F.S. Or, if this document is being filed ereby confirm that the limited liability company has been
Signature of Registered Agent	