## - LIO 000 179802

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**S Warren**JUL 2 9 2016

## **COVER LETTER**

TO:	Registration Section Division of Corporations		•
SUBJ	ECT: WHEN ALL SEEMS TO BE	GOING W	ELL, LLC
CODO		e of Limited	Liability Company
Dear S	Sir or Madam:		
The er	nclosed Registered Agent/Registered Offi	ce Change a	nd fee(s) are submitted for filing.
Please	return all correspondence concerning thi	s matter to th	ne following:
DAN	IEL D. WHITEHOUSE, ESQ.		
	Name of Person		
WHI.	TEHOUSE & COOPER, PLLC		
•	Firm/Company		
201	EAST PINE STREET, SUITE 205		
	Address		<del></del>
ORL	ANDO, FL 32801		
,	City/State and Zip Code		
e.wa	rren@voiceonyx.com		
	E-mail address: (to be used for future ann	ual report no	tification)
For fu	rther information concerning this matter,	please call:	
Dani	el D. Whitehouse, Esq.	321 at (	285-2300
	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	· 1	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
INHSI	18 (2/14)		

## 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.

. (a)	6150 METROWEST BLVD	(b) 6150 METROWEST BLVD						
` /	Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)		. ,	_			liability com	
	SUITE 305		SUITE	,	1,11,11	1001	0111000	<u> </u>
	ORLANDO, FL 32835		ORLAN	NDO, FI	_ 3283	5		
	7/29/2010		L100000	79802				•
	Date of filing/registration in Florida	4.		Docum	nent num	ıber		
. (a)	WARREN, EDWARD A							
(4)	Registered Agent and Registered Office shown on the re	cords of the Flori	ida Dept. of Sta	— ate:				
	745 BAINBRIDGE LOOP							
	745 BAINBRIDGE LOOP  Registered Office Address (MUST BE FLORIDA S	TREET ADDRE	<u>SS)</u>	_				
				_				
				_				
(b)	Registered Office Address (MUST BE FLORIDA S	TREET ADDRE		- - -		2819		
(b)	Registered Office Address (MUST BE FLORIDA S WINTER GARDEN	, <sub>FL</sub> 3478	7	- -	TECATIAN SASSASS	266 世 2		
(b)	Registered Office Address (MUST BE FLORIDA S WINTER GARDEN WHITEHOUSE & COOPER, PLLC	, <sub>FL</sub> 3478	7	- -	FECKLIVAL OF	.世 28		
(b)	Registered Office Address (MUST BE FLORIDA S WINTER GARDEN WHITEHOUSE & COOPER, PLLC Enter name of NEW Registered Agent and/or NEW Re	, <sub>FL</sub> 3478	7	- -	RECRETARY OF STA	』 28 A II:		
(b)	WINTER GARDEN  WHITEHOUSE & COOPER, PLLC  Enter name of NEW Registered Agent and/or NEW Recommendation of NEW Registered Agent and/or NEW Recommendation of NEW Recommendation o	, <sub>FL</sub> 3478	7	- -	RECRETARY OF STATE	.世 28		

d was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Daniel D. Whitehouse, Attorney of Record Signature of a member or authorized representative of a member Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent