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SWARREN

## **COVER LETTER**

	istration Section sion of Corporations							
SUBJECT:	Energy Works! Holistic Health	h and Learnin	g Center LLC					
50202011	Name	of Limited Liab	oility Company					
Dear Sir or N	Madam:							
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.								
Please return	all correspondence concerning this	matter to the fo	llowing:					
Rosanne	Gauthier		_					
	Name of Person							
Energy W	orks! Holistic Health and Learn	ning Center L	L					
	Firm/Company		-					
2809 S. B	aywater Avenue							
	Address	•	-					
San Pedro	o, CA 90731							
	City/State and Zip Code		-					
rose@Ene	ergyWorksCenter.com							
E-mail	address: (to be used for future annu	al report notific	ation)					
For further i	nformation concerning this matter, p	olease call:						
Rosanne	Gauthier	239	565-5740					
	Name of Person		Area Code & Daytime Telephone Number					
Reg Divi Clift 266	REET/COURIER ADDRESS: istration Section ision of Corporations ton Building 1 Executive Center Circle ahassee, Florida 32301	Regi Divis P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, Florida 32314					
Enclosed is a check for the following amount:								
☑ \$	25 Filing Fee	<b>□</b> \$55	Filing Fee & Certified Copy					

INHS18 (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.

1.	Na	me of the limited liability company: Energy Works	s! Holis	tic F	lealth and Le	earning Center	LLC
2.	(a)	Change of Principal Office Address:	(h	o)			
	(-)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (	·)	_	ldress of limited liabili MAY BE POST OFF	
		15339 Wimborne Lane		28	09 S. Baywa	ter Ave.	
		Naples, FL 34110	<del></del>	Sa	n Pedro, CA	90731	
		September 1, 2010		L10	000094824		
3.		Date of filing/registration in Florida	4.		Docume	ent number	
5.	(a)						
٠.	(4)	Registered Agent and Registered Office shown on the records of t	he Florida	a Dept	. of State:		
		Rosanne G Gauthier-Lepine					
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	<u>)</u>			
		2537 Granada Circle C.				22	
		St. Petersburg , FL	33712	-391	9	2016 MAY 10	The same
						54	3
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				<b>新た</b> の カ	Ш
		Elifei fiante of NEW Registered Agent and/of NEW Registered	Office au	<u>uress</u>	•	F P	O
						AY 10 P 3: 31 ETARY OF STATE HASSEF, FLORID	
		NEW Registered Office Address:				>	
		15339 Wimborne Lane			<u> </u>		
		Naples	34110				
		, FL			<del></del>		
the age	cha ent v s/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- tere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regi ability co of the lin	stere ompa nited	d office and the my, it is hereby liability compa	e business office of confirmed that the	f the registered e change(s)
H		asse X. Santer- Texine	Ro	sanı	ne G Gauthie	er-Lepine	
		ture of a member or authorized representative of a member			Printed of	or typed name of signe	ee
prothe to	ovisi obl mer tifle	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as provided ly reflect a change in the registered office address, I have been address, I have been a change in the registered office address, I have been address, I have been address.	ree to ac perform d for in the hereby c	t in t eance Chap eonfir	his capacity. 1 of my duties, a ster 605, F.S. O m that the limit	further agree to co ind I am familiar v Dr, if this documen ted liability compa	omply with the vith and accept t is being filed ny has been
		re of Registered Agent	_				