L110000 43170

| (Requestor's Name) | | |
|---|--------------------|-------------|
| (Address) | | |
| (Address) | | |
| (Cit | ry/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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SICREPANY OF STATE

O. BRUCE

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|---|
| SUBJECT: Contain - it We Name of Lin | mited Liability Company |
| Dear Sir or Madam: | |
| The enclosed Registered Agent/Registered Office Cha | nge and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter | er to the following: |
| Analuiza Von Lachma Name of Person | unn_ |
| Contain-it UC Firm/Company | |
| 2703 Day Ave #3 | |
| Heavi FL 33/3 City/State and Zip Code | <u>3</u> |
| E-mail address: (to be used for future annual rep | ort notification) |
| For further information concerning this matter, please | call: |
| Analuza von Lachnann | 305, 778 8865 5 C |
| Name of Person | Area Code & Daytime Télephone 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 amoun | nt: |
| \$25 Filing Fee | ☐ \$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.

| me of the limited liability company: | tain- | it UC |
|---|---|---|
| 2703 Day Ave #3 | (b) | |
| Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| Mani FL 33/33 | | |
| 04/11/2011 Date of filing/registration in Florida | 4. | L_110000 43170 Document number |
| Corporate Creations | | |
| 11380 Prosperity For Registered Office Address (MUST BE FLORIDA STREET) Palm Beach Garder , FL Analus 2a Von Lach | arms ADDRESSI 15 33 Many | Road # 221E 410 2 |
| | 3 | 080 St. 25. |
| NEW Registered Office Address: Marci | | |
| , FL | 33/ | <u>33</u> |
| nge or changes are made, the Florida street address of fill be identical. Or, in the case of a Florida limited li- re authorized by an affirmative vote of the members of | the register ability comp of the limited liab | ed office and the business office of the registered rany, it is hereby confirmed that the change(s) I liability company or as otherwise provided in ility company. |
| SADO | A | natuza von Lachmann |
| and account the appointment as registered agent and account | ree to act in performanc d for in Cha hereby confi | Printed or typed name of signee this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been |
| | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) MAN I 33/33 O4 / 11 / 2011 Date of filling/registration in Florida (or porate Creations) Registered Agent and Registered Office shown on the records of 1380 Prosperity For Registered Office Address (MUST BE FLORIDA STREET Palm Beach Gaude) FL. Haward Prosperity For Registered Office Address (MUST BE FLORIDA STREET Palm Beach Gaude) Enter name of NEW Registered Agent and/or NEW Registered Palm Registered Agent and/or NEW Registered Address: MEW Registered Office Address: MEW Registered Office Address: FL. Haward Prosperity For Registered Agent and/or NEW Registered Address: MEW Registered Office Address: FL. Haward Prosperity Company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of each particular of the operating agreement of the prosperity of the proper and complete gations of my passifing as registered agent as provide the registered agent as provide in writing of which hange. | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) PLAN H 33/33 O4 / 11 / 2011 Date of filing/registration in Florida 4. (Or porate Creation) Registered Agent and Registered Office shown on the records of the Florida Deception of the Florida STREET ADDRESS) Palm Beach Gardens FL 33- Hadward Von Lachmann Enter name of NEW Registered Agent and/or NEW Registered Office address Palm Beach Gardens FL 33- NEW Registered Office Address: FL 33- NEW Registered |

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