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S. WARREN : JUL 1 9 2017

## COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: FLO MOSS Art. LLC  Name of Limited 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 the following:				
FLO MOSS				
Name of Person				
Firm/Company				
5660 COLLINS AVE Address				
Address				
MIAMI REACH, FL. 33140  City/State and Zip Code				
City/State and Zip Code				
DONNYMOSS@ME. COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
DONALD MOSS at 917 399-8574  Name of Person Area Code & Daytime Telephone Number				
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  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				

1NHS18 (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: Flo Moss Apt, LLC	C	<u> </u>		
2. (a)	F-LO MOSS	(b) FL	o Moss		
<u> </u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*)	Mailing address of li		
	5660 COllins Ave, PHA	566	o Culling	Are P	HA
	Mion: Beach, FL 33140	MIC	im: Bea	ch, FL	33140
	April 17, 2012	L120000	)52047		
3.	Date of filing/registration in Florida 4.		Document num	ber	
5. (a)	Atrium Registered Agents, Inc.				
υ. (u)	Registered Agent and Registered Office shown on the records of the Fl	orida Dept. of Sta	nte:		
	8950 SW 74th Ct Ste 1901		_		
	Registered Office Address (MUST BE FLORIDA STREET ADDR	RESS)			
	Miami ,FL 331	156		, Ç	
			<del>_</del>	7	÷ :
(b)	Fro moss	<del></del>	_	F	~
	Enter name of NEW Registered Agent and/or NEW Registered Office	e address:		器 7	<u></u>
	FLO MOSS			JUL 17 AM 10: Brikischer (10)	ΕĐ
	NEW Registered Office Address:				
	5660 COLLINS AVE PHA	!		56 111 112 113 114	
			<del>_</del>		
	MIAMI BEACH ,FL.	33140			
Signal I herein the oblito mere notified	imited liability company is not organized under the laws of inge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liability at the case of organization or the operating agreement of the limitative of a member or authorized representative of a member of a member of a member of a member of all statutes relative to the proper and complete perfigations of my position as registered agent as provided for all reflect a change in the registered office address. I here of the proper of this change.	registered officty company, it is limited liabilited liability ed	is hereby confirmity company or as ompany.  Mo 55  Printed or typed n	ss office of the ned that the cha otherwise prov	registered nge(s) vided in