

212000092952

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

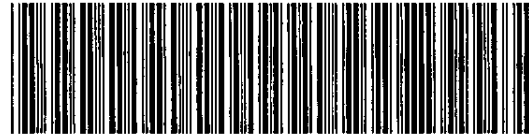
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700250998577

08/29/13--01010--003 \*\*25.00

FILED  
13 AUG 29 AM 11:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers SEP 06 2013

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Marcella's Violin / Viola Studio, 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:

Marcella Edwards  
Name of Person

Marcella's Violin / Viola Studio, LLC  
Firm/Company

1632 NW 11th St  
Address

Fort Lauderdale, FL 33311  
City/State and Zip Code

Marcee5@MSN.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marcella Edwards at (954) 804.3334  
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

☐ \$55 Filing Fee & Certified Copy

FILED  
13 AUG 29 AM 11:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, 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: Marcella's Violin/Viola Studio, LLC

2. (a) Principal office address of limited liability company: 1632 NW 11th St  
(Note: **MUST BE STREET ADDRESS**) Fort Lauderdale, FL 33311

(b) Mailing address of limited liability company: 1632 NW 11th St  
(Note: **MAY BE POST OFFICE BOX**) Fort Lauderdale, FL 33311

July 18, 2012  
3. Date of filing/registration in Florida

L12000090952  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

United States Corporation Agents, Inc.

Registered Office Address:

13302 Winding Oak Court  
A  
Tampa, FL 33612

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:**

Marcella Edwards

**NEW Registered Office Address:**

(**MUST BE FLORIDA STREET ADDRESS**)

1632 NW 11th St  
Fort Lauderdale  
Fort Lauderdale, FL 33311

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) 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.

Marcella Edwards  
Signature of a member or authorized representative of a member

Marcella Edwards  
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity and 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 608, 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.

Marcella Edwards  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00