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COVER LETTER

TO: Registration Section Division of Corporations	
Theresa Suslov, LLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Theresa Sustov	
Name of Person	
Theresa Suslov, LLC	
Firm/Company	
19207 Alice Circle	
Address	
Lutz. FL 33558	
City/State and Zip Code	
theresasuslov@gmail.com	
E-mail address: (to be used for future annual re	eport notification)
For further information concerning this matter, pleas	se call:
Theresa Susłov at	813 428-4319
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amo	unt:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14) (beck# 144)	

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	ame of the limited liability company: Theresa Suslov,	LLC					
2. (a)		(b)					
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(\(\cdot\)	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	19207 Alice Circle	19	19207 Alice Circle				
	Lutx, FL 33558	L.i	Lutz. FL 33558				
	07/31/2012	L1.	200009827	54			
3.	Date of filing/registration in Florida	4.	-	Document ni	ımber		
5. (a)	UNITED STATES CORPORATION AGENTS, INC						
J. (a)	Registered Agent and Registered Office shown on the records of 19207 Alice Circle, Lutz, FL 33558	of the Florida De	pt. of State:	:			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				₹., r	<u>.</u>	
	19207 Alice Circle					891	
	Lutz , F	L 33558			AHAS	9891 APR IL	
(b)					LLAHASSEE FLORIDA	M 6: 4	
, ,	Enter name of NEW Registered Agent and/or NEW Registered	ed Office addre	77.		10. 1.S. 1.	<u>්</u> ල	
	New Registered Agent: Theresa Suslov			•	RIDA	<u>-</u>	
	NEW Registered Office Address:		<u>.</u>				
	19207 Alice Circle						
	Lutz, F	L 33558					
change agent was/we the arts	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the florida limited laws of a member or authorized representative of a member	ie registered o liability comp of the limited	office and any, it is I liability ility comp Suslov	the business hereby confi company or pany.	office of the rmed that the	registered c change(s) provided in	
provisi the obt to mer notifie	by accept the appointment as registered agent and as ions of all statutes relative to the proper and completing the statutes relative to the proper and completing the statutes of my position as registered agent as providely reflect a change in the registered office address, it is writing of this change.	gree to act in i e performance led for in Chaj I hereby confi	this capac e of my di pter 605, rm that th	city. I furthe uties, and I a F.S. Or, if to be limited lia	r agree to co im familiar w his document bility compai	mply with the ith and accept t is being filed ny has been	
Signatu	ire of Registered Agent						

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