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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

: (307)200-2803

Fax Number

: (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## LLC REGISTERED AGENT CHANGE JOURNEYS OF EXCELLENCE LLC

Certificate of Status	0
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JAN - 3 2020

## 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: Journeys	Of E	xcelle	nce LLC	<del></del>		
2	(a)	10446 Jardim de Largo St	(h	(b) 10446 Jardim de Largo St				
<i>i</i> .	(a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
		Clermont, FL 34711		Clermont, FL 34711				
			<del>_</del>					
		12/27/12	L12000160611					
3.		Date of filing/registration in Florida	4,		Document number			
5	(a)	UNITED STATES CORPORATION AGENTS	S, INC.					
٠,٠	(11)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State	e:			
		5575 S. SEMORAN BLVD						
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	1	_			
		SUITE 36						
		ORLANDO 61	32822	·	_			
		, PI,			_			
	(b)	Registered Agents Inc.			_			
	, ,	Enter name of NEW Registered Agent and/or NEW Registered	Office add	<u>lress</u> :	<b>3</b>			
		7901 4th St N			2019 JAN -2 PH 5: 1 SECRETARY OF ST TALLAHASSEE, F	october 1		
		NEW Registered Office Address:			AAT -S	-		
		STE 300				M		
		St. Petersburg	33702	)		U		
the ag wa the	e cha ent v is/we arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia- ter authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registibility confirmated limited l	stered office impany, it is ited liability iability com	orida, it is hereby confirmed that a e and the business office of the reg is hereby confirmed that the chang ty company or as otherwise provid	gistered e(s)		
		Ritury Talk use of a member or authorized representative of a member	Rile	y Park	Printed or typed name of signee			
			an to act	in this can		uith the		
pr the to	ovisi e obl mere tiljec	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I lim writing of this change.  Bill Havre - Assistan	perform d for in ( hereby co	ance of my o Chapter 605 Onfirm that	daties, and I am familiar with and daties, and I am familiar with and 5, F.S. Or, if this document is beir the limited liability company has	an ine l accept ig filed been		
Si		re of Registered Agent		iui y				