## LB000000408

(Requestor's Name)				
(Address)				
(Address)				
ity/State/Zip/Phone	e #)			
WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certificates	of Status			
Special Instructions to Filing Officer:				
	:			
	:			
	ddress)  ddress)  ity/State/Zip/Phone  WAIT  usiness Entity Nan  ocument Number)  Certificates			

Office Use Only



800291446908

01/05/17--01008--013 \*\*25.00

17 JAN -5 PH P: 57

'JAN 0 6 2017

Y SULKER

## COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	Live Oak Yoga and Mass	age LLC	
3009		Name of Limite	l Liability Company
Dear S	Sir or Madam:		
The e	nclosed Registered Agent/Registered	Office Change:	and fee(s) are submitted for filing.
Please	return all correspondence concerning	g this matter to	the following:
Nata	fia Tobon Galindo		
	Name of Person		
Live	Oak Yoga and Massage LLC		
	Firm/Company	a i tampus pra	
2901	Curry Ford Rd St2		
	Address	<u>۔۔۔۔</u> ، ۔۔ می <u>ں ۔۔</u>	•
Orlar	ndo FL, 32806		
	City/State and Zip Coc	le	
livoo	akyoga@gmail.com		
!	E-mail address: (to be used for future	annual report n	otification)
For tu	rther information concerning this ma	tier, please call:	
Natai	lia Tobon	40 <b>7</b>	<sub>,</sub> 212- <del>298</del> 8
	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section		MAJLING ADDRESS: Registration Section
	Division of Corporations		Division of Corporations
	Clifton Building		P.O. Box 6327
	2661 Executive Center Circle		Tallahassee, Florida 32314

D \$55 Filing Fee & Certified Copy

Tallahassee, Florida 32301

XI \$25 Filing Fee

Euclosed is a check for the following amount:

## 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.	Name of the limited liability company: Live Oak Yo	oga and Mass	age LLC
2. (a	2901 Curry Ford Rd Ste 2 Orlando Fl, 328	06 <sub>(b)</sub> 290	01 Curry Ford Rd Ste 2 Orlando Fl 3280
۷. (۱	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	12-31-2016	L130	00000408
3.	Date of filing/registration in Florida	4.	Document number
5. (	a) Kristina Coleman		
J. (	Registered Agent and Registered Office shown on the records		of State:
	Registered Office Address (MUST BE FLORIDA STREET 2901 Curry Ford Rd Ste 2	ET ADDRESS)	
	Orlando	<sub>FL</sub> 32806	17 JJ
(1	、Natalia Tobon Galindo	51 dansk 5 y 6 MA .v.	JAN -5
	Enter name of NEW Registered Agent and/or NEW Registe	red Office address:	PH P. ST
	NEW Registered Office Address:	-	
	2901 Curry Ford Rd Ste 2		
	Orlando	FL 32806	
the dagen was/ the a	c limited liability company is not organized under the change or changes are made, the Florida street address it will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member articles of organization or the operating agreement of the member of a m	s of the registered I liability compares of the limited I the limited liabili	office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.  Printed or typed name of signce
the o to m notij	reby accept the appointment as registered agent and t isions of all statutes relative to the proper and complo ibligations of my position as registered agent as provi erely reflect a change in the registered office address, led in writing of this change.	ided for in Chapt , I hereby confirm	er 605, F.S. Or, if this document is being filed n that the limited liability company has been