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March 3, 2014

Shannon Allen, Esq. 120 W. Central Ave. Suite 6 Winter Haven, FL 33880 www.AllenLawLLC.org

Office: (863) 326-2651 sallen@AllenLawLLC.org

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Business Address Update

Fictitious Name Registration Number: G13000018981

To Whom It May Concern;

The purpose of this letter is to provide notice that the business address for Allen Law, LLC has changed as follows:

OLD Address:

Allen Law, LLC Legal Arts Building 20 South Rose Avenue, Suite 3B Kissimmee, FL 34741

NEW Address:

Allen Law, LLC 120 West Central Avenue Suite 6 Winter Haven, FL 33880

Please find enclosed:

- 1) the Registration Section's Cover Letter;
- 2) a signed copy of the Statement of Change of Registered Office for Limited Liability Company;
- 3) a copy of the incorrect Fictitious Name Details currently listed on Sunbiz; and
- 4) check #7605, in the amount of \$25.00 for applicable filing fees.

If you need anything else from me in order to update the Fictitious Name Details, please let me know.

Sincerely.

Shannon Allen, Esq.

COVER LETTER

☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy
Enclosed is a check for the following amount	:
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
Name of Person	Area Code & Daytime Telephone Number
Shannon Allen, Esq. 40	756-6156
For further information concerning this matter, please contents	all:
E-mail address: (to be used for future annual repor	rt notification)
shannon_a_allen@msn.com	
Davenport, FL 33837 City/State and Zip Code	
Address	*·*
826 Lobelia Drive	
Firm/Company	
Allen Law, LLC	
Name of Person	
Shannon Allen, Esq.	
Please return all correspondence concerning this matter	to the following:
The enclosed Registered Agent/Registered Office Change	ge and fee(s) are submitted for filing.
Dear Sir or Madam:	
Name of Lim	ited Liability Company
SUBJECT:	
TO: Registration Section Division of Corporations	

INHS18 (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. 1	Name of the limited liability company: Allen Law	, LLC					
2. (a	120 W Central Ave. Suite 6		(b) 826 Lobelia Drive				
2. (a	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)		
	Winter Haven, FL 33880	· · · · · · · · · · · · · · · · · · ·	Dave	enport, FL 33	3837		
	02/24/2013		G130	00018981 (F	ictitious N	lame)	
3.	Date of filing/registration in Florida	4.		Document	t number		
5. (a	Shannon A. Allen - Allen Law, LLC						
J. (Registered Agent and Registered Office shown on the record	ds of the Flor	ida Dept. of	f State:			
	Legal Arts Building						
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDRE	ESS)				
	20 South Rose Avenue, Suite 3B						
	Kissimmee	. FL 347 4	11				
(b	Shannon Allen, Esq Allen Law, LLC	-, · <u></u>				and only of the last only of	
`	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	tered Office	address:		3 *** 25.	7.3 25	
	120 W. Central Ave., Suite 6					ÇZY Seni	
	NEW Registered Office Address:				23		
		· · · · · · · · · · · · · · · · · · ·				्र इत् इत्	•
	Winter Haven	. FL 3388	30				
the c agent was/	e limited liability company is not organized under the hange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limit were authorized by an affirmative vote of the membericles of organization or the operating agreement of	ss of the re ed liability ers of the l f the limite	gistered of company imited liated liated	office and the book, it is hereby conbility company company.	ousiness offi onfirmed th	ice of that the c	ne registered hange(s)
		_ <u> </u>	hannon				
_	nature of a member or authorized representative of a member				typed name of		
prov. the o	rehy accept the appointment as registered agent and sions of all statutes relative to the proper and completions of my position as registered agent as properly reflect a change in the registered office addressed in writing of this change.	d agree to o pleie perfoi wided for i ss, I hereby	act in this rmance of n Chapter confirm	capacity. I fur fmy duties, and r 605, F.S. Or, that the limited	rther agree l I am famil if this docu l liability co	to com lar with ment is mpany	pty with the n and accept s being filed has been

Signature of Registered Agent