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SLUBETANT OF STATE
TALLAHASSEE FLORIDA

T. Burch NO. 18 2013.

COVER LETTER

•,	TO:	Registration Section Division of Corporations	
	SUBJ	JECT: Kailey Faith Pl Name of Limited Li	
	Dear S	Sir or Madam:	
	The e	enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.
	Please	se return all correspondence concerning this matter	er to the following:
	<u></u> <u>K</u>	Kailey Faith Chown	ning
	Ko	ailey Faith Photogra	
	30	Le Harbour Isle Dr. Wes	st Unit 106
	F1.	Pierce, AL 34949 City/State and Zip Code	
		Kaileyfaith@me.com E-mail address: (26 be used for future annual report notification)	
	For fu	further information concerning this matter, please	call:
	K	ailey Chowning at (7)	72 <u>563 - 7143</u> 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

\$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

□ \$25 Filing Fee

BOTH FOR LIMITED LIABILITY COMPANY

1. Name of the limited liability company: 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Office Address: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Office Address: (c) New Registered Office Address: (d) New Registered Office Address: (e) New Registered Office Address: (f) New Registered Office Address: (g) New Registered Office Address: (h) Enter name of New Registered Agent and/or New Registered Office address: (h) New Registered Office Address:
(Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) (Note: MAY BE POST OFFICE BOX) 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: (c) Nath Low Ft. Dierce, FL 34949 4. Document number 4. Document number 5. (a) Registered Agent: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: (c) NEW Registered Agent: (d) Ft. Dierce, FL 34949 4. Document number 5. (a) Registered Agent: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: (e) NEW Registered Agent: (f) NEW Registered Agent
(Note: MAY BE POST OFFICE BOX) June 20 to 2018
3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Registered Office Address: Mailey F. Bradbury
Registered Agent: Registered Office Address: Kailey F. Bradbury
Registered Office Address: Must Palm Busch, 71 33 413 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: Kailey F. Chowning
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: Kailey F. Chowning
NEW Registered Agent: Kailey F. Chowning
NEW Registered Agent: Kailey F. Chowning
NEW Registered Office Address: 36 Harbour Isle Drive West
(MUST BE FLORIDA STREET ADDRESS) Unit 100 71. Pierce ,FL 34949
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. Signature of amember or authorized representative of a member I hereby accept the appointment as registered agent and agree to act in this capacity. I 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.

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