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EXAMINER

COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations	
CHASING TRENDS, LLC SUBJECT:	
	ne of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
COLBY FOX	
Name of Person	
CHASING TRENDS, LLC	
Firm/Company	
1701 N 14TH STREET, SUITE B	· · · · · · · · · · · · · · · · · · ·
Address	· 🛬
TAMPA, FL 33605	
City/State and Zip Code	 _
COLBY@TACHHT.COM	
E-mail address: (to be used for future and	nual report notification)
For further information concerning this matter	, please call:
COLBY FOX	813 699.4250
Name of Person	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
Enclosed is a check for the following	g amount:
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

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.

(a)		(}	o)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	07/15/2013	_	L13000	0102287
(-\	Date of filing/registration in Florida BEVERLY SMOAK	 4.	4	Document number
(a)	Registered Agent and Registered Office shown on the records of 1701 N 14TH STREET SUITE B	the Florid	a Dept. of S	State:
	Registered Office Address (MUST BE FLORIDA STREET	SEF		
	TAMPA, FI	33605		17.12
(b)	SHYAMIE DIXIT			*
	Enter name of NEW Registered Agent and/or NEW Registered 3030 NORTH ROCKY POINT DRIVE SUIT			
	NEW Registered Office Address:			
	TAMPA , FI	33607	,	
· oho	imited liability company is not organized under the lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization of the operating agreement of the	f the reg iability c of the lir c limited	istered of ompany, nited liab liability (ffice and the business office of the register it is hereby confirmed that the change(s) offity company or as otherwise provided in company.
Siona	ture of a member or authorized representative of a member		DLBY FO	Printed or typed name of signee
	by accept the appointment as registered agent and agens 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	ree to ac perforn ed for in	et in this on mance of i Chapter	canacity. I further agree to comply with t