L13020 112845

	(Requestor's Name)				
	(Address)				
	(Address)				
	(City/State/Zip/Phone #)				
PICK-UP	P WAIT	MAIL			
	(Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of S	Status			
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COVER LETTER

TO:

Registration Section

Divi	sion of Corporations				
SUBJECT:	Three Elephants, LLC				
Schare 1.	Name of Limited Liability Company				
Dear Sir or N	Madam:				
The enclosed	l Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filling.		
Please return	all correspondence concerning thi	s matter to the	following:		
Uzi Grinbe	erg				
	Name of Person				
President					
	Firm/Company		_		
5601 Powe	erline Road, Suite 301				
	Address				
Ft. Lauder	dale, FL 33309				
•	City/State and Zip Code		_		
	vinaminute.com				
E-mail	address: (to be used for future ann	ual report notif	ication)		
For further in	nformation concerning this matter,	please call:			
Uzi Grinbe	erg	404 at (783-4600		
	Name of Person		Area Code & Daytime Telephone Number		
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301	Re Di P.C	ailing address: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314		
Encl	losed is a check for the following	amount:			
2 \$:	25 Filing Fee	□ \$3	55 Filing Fee & Certified Copy		
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

. (a)	Principal office address of limited liability company:	'	Mailing address of limited liability compa
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BO)
	5601 Powerline Road, Suite 301		5601 Powerline Road, Suite 301
	Ft. Lauderdale, FL 33309		Ft. Lauderdale, FL 33309
	1/23/2018		L13000112845
	Date of filing/registration in Florida	4.	Document number
(a)	Uzi Grinberg		
	Registered Agent and Registered Office shown on the records of Registered Office Address (MUST BE FLORIDA STREET)		
	Registered Office Address (MUST BE FLORIDA STREET 1867 SW 31st Avenue	TADDRES	
	Registered Office Address (MUST BE FLORIDA STREET 1867 SW 31st Avenue		
(b)	Registered Office Address (MUST BE FLORIDA STREET 1867 SW 31st Avenue Hallandale Beach Uzi Grinberg	133009	
(b)	Registered Office Address (MUST BE FLORIDA STREET) 1867 SW 31st Avenue Hallandale Beach	133009	SECRETARY OF STALLAND, SSEE, FL
(b)	Registered Office Address (MUST BE FLORIDA STREET 1867 SW 31st Avenue Hallandale Beach Uzi Grinberg	133009	
(b)	Registered Office Address (MUST BE FLORIDA STREET 1867 SW 31st Avenue Hallandale Beach Uzi Grinberg Enter name of NEW Registered Agent and/or NEW Registered	133009	

d the articles of organization or the operating agreement of the limited liability company.

40	Uzi Grinberg
Signature of a member or authorized representative of a member	Printed or typed name of signee

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 605, 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.

attife of Registered Agent-