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17 SEP -1 AH ID: 57.
SECRETARY OF STATE

S. WARREN SEP 0 5 2017

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: INSTRUIO, LLC	
Name of	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Steven Lenoff	
Name of Person	· · · · · · · · · · · · · · · · · · ·
Lenoff and Lenoff, P.A.	
Firm/Company	
4800 N. Federal Hwy Ste 301E	
Address	
Boca Raton, FL 33431	
City/State and Zip Code	
Steven@Lenoff.com	
E-mail address: (to be used for future annual i	report notification)
For further information concerning this matter, plea	ase call:
Steven Lenoff	561 409-8800
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 amo	ount:
☑ \$25 Filing Fee	☐ \$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 Florida.

I. No	ame of the limited liability company: INSTRUIO, LI	LC				
2. (a)						
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limite (Note: MAY BE POS			
3.	Date of filing/registration in Florida	L130001:	51244 Document number			
./.	Steven Lenoff	••	150ctiment manuel			
5. (a)	Registered Agent and Registered Office shown on the records of to 1761 West Hillsboro Boulevard Suite 405 Registered Office Address	·	- e: -			
	Deerfield Beach	33442	-			-
(b)	Steven Lenoff		-	ALL ME	17 SEP -	13
	Einter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 4800 North Federal Highway Building E Suit <u>NEW Registered Office Address:</u>	e 301	 -	TARY OF STATE IASSEE, FLORIDA	-1 AM 10: 57,	FILED
	Boca Raton UFL	33431				
Signa I here provisi	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cless of organization or the operating agreement of the ture of a member or authorized representative of a registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address. If the writing of this change.	the registered officability company, it is find the limited liability consisted limited liability constants. Steven Leno	e and the business of s hereby confirmed y company or as oth npany. off, as authorized Printed or typed name	ffice of that the control of signed	he reg chang provid entat	gistered e(s) led in
Signatu	re of Registered Agent as regas agen					
	Division of Corporations P.O. F	Box 6327● Tallaha	ssee, FL 32314			

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