## 13000162764

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## **COVER LETTER**

INHS18 (2/14)

TO:	Registration Section Division of Corporations		•		
SUBJ	Mancini Italian Shutters and	1 Windows L	LC .		
	Nar	ne of Limited	Liability Company		
Dear :	Sir or Madam:				
The e	nclosed Registered Agent/Registered Off	fice Change an	d fee(s) are submitted for filing	<u>;</u> .	
Please	e return all correspondence concerning th	is matter to the	e following:		
Flavi	io Mancini			•	
	Name of Person		. <u> </u>		
Man	cini Italian Shutters and Windows	LLC			
	Firm/Company				
3876	5 59th Ave W				
	Address			2017 SEC TALL	
Brad	enton, Fl 34210			SECHETARY	TILDE
	City/State and Zip Code	. —	<del></del>	CT1	П
info@	mancini.company			17 TO W	C
	E-mail address: (to be used for future and	nual report not	ification)	ORIGINA ORIGIN ORIGINA ORIGINA ORIGINA ORIGINA ORIGINA ORIGINA ORIGINA ORIGINA	
For fu	orther information concerning this matter	, please call:		> <u> </u>	
Flavi	o Mancini	941 at (	350-2581		
	Name of Person		Area Code & Daytime Tele	phone Number	
	Registration SectionRegiDivision of CorporationsDiviClifton BuildingP.O.		fAILING ADDRESS: egistration Section vivision of Corporations O. Box 6327 allahassee, Florida 32314	·	
	Enclosed is a check for the following	g amount:			
<b>☑</b> \$25 Filing Fee			\$55 Filing Fee & Certified Cop	у	

## 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. Na	ume of the limited liability company: Mancini Italian	Shutters and	d Windows LLC
2. (a)	3876 59th Ave w, Bradenton Fl 34210	(b)	
Σ. (α)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
3.	04/14/2017 - 11 20/2013  Date of filing/registration in Florida	L1300	0162764  Document number
	Jaensh P. Christopher	٦.	Bocament namoer
5. (a)	Registered Agent and Registered Office shown on the records of the 2198 main st, Sarasota Fl 34237  Registered Office Address (MUST BE FLORIDA STREET A.)	State:	
(b)	Flavio Mancini		2817 ALL
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u> 3876 59th Ave W, Bradenton Fl 34210	AHASSE AHASSE	
	NEW Registered Office Address:		P 3 34  OF STATE  E.F.LORIDA
	, FL_		<u></u>
the cha agent v was/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the registered o bility company f the limited lia	ffice and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in
· .		Flavio Ma	
I here provisi the obl to mere notified	type of a member or authorized representative of a member by accept the appointment as registered agent and agretions of all statutes relative to the proper and complete to igations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change	ee to act in this performance of I for in Chapter erehy confirm i	Printed or typed name of signee capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been