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(Re	questor's Name)			
(Address)				
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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8 Warren

APR 03 2017

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Sales 101, LLC					
Name o	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this n	natter to the following:				
Henry A Cheli					
Name of Person	······································				
Sales 101, LLC					
Firm/Company					
501 Sanctuary Dr					
Address					
Key Largo, Florida 33037					
City/State and Zip Code					
henrycheli1@gmail.com					
E-mail address: (to be used for future annual	report notification)				
For further information concerning this matter, ple	ease call:				
Henry A Cheli	954 895-1319 at ()				
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 amount:					
☑ \$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.

1. Na	me of the limited liability company: Sales 101, L	LC	
2. (a)	501 Sanctuary Dr	(b) 501 San	ictuary Dr
-· () .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Sanctuary Dr	Sanctua	ry Dr
	Key Largo, Florida 33037	Key Larg	go, Florida 33037
	3-10-14	L1400003	39599
3.	Date of filing/registration in Florida	4.	Document number
(b) ,	Registered Agent and Registered Office shown on the records of UNITED STATES CORPORATION AGENT Registered Office Address (MUST BE FLORIDA STREET 13302 WINDING OAKS COURT, Suite A TAMPA , FI Henry A Cheli Enter name of NEW Registered Agent and/or NEW Registered 501 Sanctuary Dr. NEW Registered Office Address:	TS, INC. <u>ADDRESS)</u> 33612	FILED THE STATE STATE SHASSEL FLORIDA
	Key Largo, FI	_33037	
the charagent was/we the articles Signate I hereb provisic the oblit to mere notified	mited liability company is not organized under the lange or changes are made, the Florida street address or ill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members cles of organization or the operating agreement of the cure of a member or authorized representative of a member by accept the appointment as registered agent and age of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	f the registered office iability company, it is of the limited liability complete liability company.	and the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in apany. Printed or typed name of signee

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