14000056638

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(Ad	ldress)	
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COVER LETTER

TO:	Amendment Section Division of Corporations
	Island Life Strategies, LLC
SUBJ	ECT:Name of Corporation
	L1400056638
DOC	UMENT NUMBER:
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Joyce Craig
	Name of Contact Person
	Island Life Strategies, LLC
	Firm/Company
	2210 Camino del Mar Dr.
	Address
	Sanibel, FL 33957
	City/State and Zip Code
	sanibeljoyce@gmail.com
	E-mail address: (to be used for future annual report notification)
For fi	rther information concerning this matter, please call:
Joyc	e Craig 239 472-0454
	Name of Contact Person at () Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Street Address: Amendment Section
	Division of Corporations Division of Corporations
	P.O. Box 6327 Clifton Building Tallahassaa FL 32314 2661 Evacutive Center Circle
	Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

'-- STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of <u>Florida</u> er to change its registered office or registered agent, or both, in the State of Florida.	<u>×_</u>
	Island Life Strategies, LLC the corporation: 2210 Camino del Mar Dr.	
2. The principal Sanibel, F	l office address:	
3. The mailing a	address (if different):	
4. Date of incorp	rporation/qualification: 4/7/2014 Document number: L14000056638	
	nd street address of the current registered agent and registered office on file with the current of State: (If resigned, enter resigned) CORPORATION SERVICE COMPANY	
	1201 HAYS STREET	
	TALLAHASSEE, FL 32301	
6. The name and (if changed):	ad street address of the new registered agent (if changed) and /or registered office	Elephone on the out officer
	Joyce Craig	7 T 1
	2210 Camino del Mar Dr. P.O. Box NOT acceptable	T. n.g-ris
	P.O. Box NOT acceptable Sanibel, FL 33957	
The street addre	ress of its registered office and the street address of the business office of its registered a l be identical.	gent,
Such change wa authorized by th	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Loye	Joyce Craig, Managing Member Printed or typed name and title	_
I hereby accept I further agree i	the appointment as registered agent and agree to act in this capacity. It the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered in the registered office address, I at that the corporation has been notified in writing of this change.	d
	gnature of Registered Agent $4/28/3014$	
If signing on be	ehalf of an entity:	
	Typed or Printed Name	

* * * FILING FEE: \$35.00 * * *