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COVER LETTER

INHS18 (2/14)

то:	Registration Section Division of Corporations			
SUBJI				
	Nam	ne of Limited Liab	oility Company	
Dear S	ir or Madam:			
The en	closed Registered Agent/Registered Offi	ice Change and fe	e(s) are submitted for filing.	
Please	return all correspondence concerning the	is matter to the fo	llowing:	
Tiffan	ie Babbitt			
	Name of Person		-	
Chef	Tiffanie LLC			
	Firm/Company		-	
4841	Cortez Cir			
	Address		-	
Naple	es FI 34112			
	City/State and Zip Code		-	
flame	stofork@gmail.com			
E	-mail address: (to be used for future ann	ual report notifica	ation)	
For fu	rther information concerning this matter,	please call:		
Tiffan	ie Babbitt	at (200-8227	
	Name of Person		Area Code & Daytime Teleph	one Number
	STREET/COURIER ADDRESS: Registration Section		LING ADDRESS: stration Section	
٠	Division of Corporations Clifton Building		sion of Corporations Box 6327	* A +
	2661 Executive Center Circle		hassee, Florida 32314	
3th 1	Tallahassee, Florida 32301			mid later
; ' .	Enclosed is a check for the following	amount:		
•	\$25 Filing Fee	□ \$55	Filing Fee & Certified Copy	Error Company

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.

. (a) _.	Chef Tiffanie LLC	(Chef Tiffanie L	LC		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)		
	4841 Cortez Cir		4841 Cortez C			
	Naples, Fl 34112		Naples, Fl 341	12		
	4/15/2014		L14000061499			
	Date of filing/registration in Florida	4.	Docum	nent number		
(a)	United States Corporation Agents INC.	ted States Corporation Agents INC.				
	Registered Agent and Registered Office shown on the records of United States Corporation Agents INC.	a Dept. of State:	•••			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 13302 Winding Oak Court A			2110 H		
	Tampa , F	_L 33612		ARAR SAN		
	Chef Tiffanie LLC					
	Enter name of NEW Registered Agent and/or NEW Registered	dress:				
	Tiffanie Babbitt			37 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
	NEW Registered Office Address:	, , , ,				
	4841 Cortez Cir		**************************************			
	Naples , F	_L 34112				
char	mited liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members	of the reg liability c	stered office and the ompany, it is hereby	te business office of the registy confirmed that the change(
s/we	cles of organization or the operating agreement of the			, F		

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.

Signature of Registered Agent