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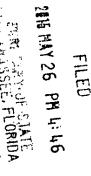
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MAY 29 **2015** A RAMSEY

COVER LETTER			
TO: Registration Section Division of Corporations			
SUBJECT: Shanno Pushin, LLC 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 matter to the following:			
Shonne L. Austin, Esq. Name of Person			
Grigaltchik + Galustov, P.A. Firm/Company			
6144 Gazebo Park Pl. S., #103			
Jacksonville, Fl 32257 City/State and Zip Code			
Shanna @ griglaw. Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Shonna Prustin at 904, 738-8398 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 \$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.

Flc	ride	a.
1.	Na	ame of the limited liability company: Shorna Austin, UC
2.	(a)	Spanna Austin, LLC (b) Same
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
		4494 Surhside BIVd., Stc. 101 4144 GDZEDO PORK PI.S., #10
		JOCKSONVILLE, FL 32216. JOCKSONVILLE, FZ 32257
		04/21/2014 214 000668537
3.		Date of filing/registration in Florida 4. Document number
5.	(a)	Dovid B. Sacks, Esquire
	, ,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
		Law office of David B. Sacks, P. A.
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
		4494 Southside Blvd., Ste. 101.
		Jacksonville El 30016
	(b)	DOVICE CIPICALICATION, COLUMN
		Enter name of NEW Registered Agent and/or NEW Registered Office address:
		Law Office of Grigeltchik + Golustov, P.A.
		NEW Registered Office Address:
		6144 GOZEBO PORK PI.S., Ste. 103
		Jacksonville ,FL 32257
If t	he li	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the	cha	nge or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
was	s/we	ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
tne	\wedge	cles of organization or the operating agreement of the limited liability company.
<u>_</u> \$		ure of a member or authorized representative of a member Shanna L. Austin Printed or typed name of signee
pro the to n	visi obli nere	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.

Signature of Registered Agent