

L14000133655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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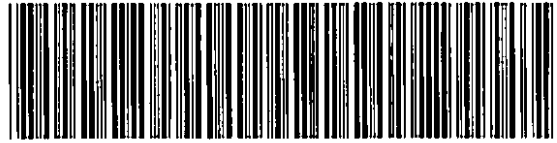
(Business Entity Name)

(Document Number)

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18 AUG -6 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

BABYBORNTOLLC

1. Name of the limited liability company: _____

BABYBORNTOLLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

2001 HOLLYWOOD BLVD, #211

HOLLYWOOD, FL 33020

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

08/26/2014

3. _____ Date of filing/registration in Florida 4. _____ Document number

MCELROY IDARRAGA, SABRIA

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

MCELROY IDARRAGA, SABRIA

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

401 EAST LAS OLAS BLVD.

FORT LAUDERDALE, 33301
_____, FL _____

MCELROY IDARRAGA, SABRIA

(b) _____
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

MCELROY IDARRAGA, SABRIA

NEW Registered Office Address:

2001 HOLLYWOOD BLVD, #211

HOLLYWOOD 33301
_____, FL _____

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TALLAHASSEE FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Sabria Mcelroy Idarraga

Printed or typed name of signee

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

Signature of Registered Agent