L14000 166436

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Do	cument Number)						
Certified Copies	_ Certificate	s of Status					
Special Instructions to Filing Officer:							

Office Use Only



200265948102

10/30/14--01029--001 **25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

NOV 13 2014 T. CARTER

LLC RAIRD Change

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJ	Morning Calm Advisors, LLC						
500		ne of Limited Liab	ility Company				
Dear S	ir or Madam:						
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.							
Please	return all correspondence concerning th	is matter to the fol	lowing:				
Brya	n Zenchyk						
	Name of Person						
Morn	ing Calm Advisors, LLC						
	Firm/Company		•				
8831	Morgan Landing Way						
	Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•				
Boyr	ton Beach, FL 33473						
	City/State and Zip Code		•				
	chyk@gmail.com						
- 1	E-mail address: (to be used for future and	nual report notifica	ntion)				
For fu	rther information concerning this matter	, please call:					
Brya	n Zenchyk	561 at (676-0342				
	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	Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, 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. N	ame of the limited liability company: Morning Caln					
2. (a)	1494 N. Ocean Blvd.	(b	(b) 1494 N. Ocean Blvd.			
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		/	Mailing address of limited l		
	Palm Beach, FL 33480	-	Palm E	Beach, FL 33480		
	10/24/14		 L14000	166436		
3.	Date of filing/registration in Florida	4.		Document number		_
5. (a)	Morning Calm Management, LLC					
(Registered Agent and Registered Office shown on the records of 1494 N. Ocean Blvd. Registered Office Address (MUST BE FLORIDA STREET)			tate:		
	Registered Office Address	<u> ADDRESS</u>	4			
	Palm Beach, FI	33480		_ _	140	SECF
/ L .\	National Corporate Research, Ltd., Inc.				OCT 30	7H2 7H3
(b)	Enter name of NEW Registered Agent and/or NEW Registered	l Office ad	dress:	<u> </u>		SSE
	155 Office Plaza Drive				PM I2: 38	EFEC OF SI
	NEW Registered Office Address:				38	TATE ORIDA
	Tallahassee, FL	32301				
the ch agent was/w	limited liability company is not organized under the larange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liverer authorized by an affirmative vote of the members cicles of organization or the operating agreement of the	f the regi: lability co of the lim	stered off ompany, inited liability contracts	ice and the business offit is hereby confirmed the lity company or as other ompany.	ice of the at the charwise prov	registered inge(s)
	nure of a member or authorized representative of a member		Br	J Printed or typed name of	· cianas	
I here provis the ob to men	the process of authorized representative of a member of authorized representative of a member and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I are in writing of this change.	ree to act perform ed for in (hereby c			-	y with the and accept peing filed as been