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CHO'S TO

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Realide Nyestments 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:
Diante Lawrence Name of Person Realidee Investments LLC
Firm/Company
7360 curry Ford Rd #721025 Address OClando F1 31872
City/State and Zip Code
Reali _ dee & out look. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dignte Lawrence at (321), 236-3629 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Division of Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:

☐ \$55 Filing Fee & Certified Copy

≦ \$25 Filing Fee

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.

Name of the limited liability company:	: Realidee	Invest	ments LLa	
2. (a) 1330 (UTY FORD RESTREET) Principal office address of limited I	do F1 3X872 liability company:		と BOX 721025, Mailing address	Strictof 33872 sof limited liability company: W BE POST OFFICE BOX)
		 <u>_</u>	_14 <i>0</i> 001833	
3. Date of filing/registration i	in Florida	4.	Document	number
5. (a)Registered Agent and Registered Office she	own on the records of the	e Florida Dep	ot, of State:	
Registered Office Address (MUST BE	FLORIDA STREET AL	ODRESS)		
	, FL			2010 DEC
Enter name of NEW Registered Agent and	d/or NEW Registered O	Office addres	<u>s</u> :	7 PH 2:
NEW Registered Office Address:	O CUTTY FORD F	Rd #7a	41025	<u> </u>
	lando FL	3287)	
If the limited liability company is not organ the change or changes are made, the Florid agent will be identical. Or, in the case of a was/were authorized by an affirmative vote the articles of organization or the operating	la street address of the Florida limited liab To of the members of	he register pility comp the limited	ed office and the bu any, it is hereby con I liability company	siness office of the registered of the change(s)
Signature of a member or authorized representative	ve of a member	Digi	HE LAWTENCE Printed or ty	ped name of signee
I hereby accept the appointment as registe provisions of all statutes relative to the prothe obligations of my position as registered to merely reflect a change in the registered notified in writing of this change.				
Diante Stuffence Signature of Registered Agent				