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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	Urban Lyfestyle LLC				
	Nan	ne of Limited L	iability Company		
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to the	following:		
Brea'	Brissett				
	Name of Person				
Urbar	n Lyfestyle LLC				
	Firm/Company				
2904	Van Gundy Rd				
	Address	······································	and a second a second and a second a second and a second a second and a second and a second and a second and		
Jacks	onville, FL 32208				
	City/State and Zip Code				
brea.	brissett@yahoo.com				
E	-mail address: (to be used for future and	nual report noti	lication)		
For fur	ther information concerning this matter	, please call:			
Brea'	Brissett	904 at (258-0387		
	Name of Person		Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS:		AILING ADDRESS:		
	Registration Section		gistration Section		
	Division of Corporations		vision of Corporations O. Box 6327		
	Clifton Building 2661 Executive Center Circle	= -	O. Box 6327 Illahassee, Florida 32314		
	Tallahassee, Florida 32301	18	ilialiassee, Flutida 32314		
Enclosed is a check for the following amount:					
	■ \$25 Filing Fee	□ \$	55 Filing Fee & Certified Copy		



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.	Na	me of the limited liability company: Urban Lyfestyl	e LLC				
2	(a)	Urban Lyfestyle LLC	(b)	Urban Ly	festyle LLC		
	(4)	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		4750-8 Soutel Dr		4750-8 S	outel Dr		
		Jacksonville, FL 32208	- -	Jacksonv	ille, FL 32208		
		1/5/15	I	L1500000	0967		
3.		Date of filing/registration in Florida	4.		Document numbe	r	
5	(a)	Brea' Brissett					
٧.	(4)	Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of State:	:		
		Brea' Brissett					
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	2			
		4082 Broad Creek Ln					
		Jacksonville , FL	32218				
	(b)	Brea' Brissett					
		Enter name of NEW Registered Agent and/or NEW Registered (Office add	<u>dress</u> :			
		Brea' Brissett				15 FE	212141 t 1,
		NEW Registered Office Address:				京三 8	Metra: Terro
		2904 Van Gundy Rd					42 44 44 44 44 44 44 44 44 44 44 44 44 4
		Jacksonville , FL	32208				Land
the ag wa the	ent vis/wie arti	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law turn of a member or authorized representative of a member by accept the appointment as registered agent and agreems of all statutes relative to the proper and complete page 1.	bility co the lim imited li	in this cana	and the business hereby confirmed company or as of pany. Printed or typed name activ. I further av.	confirmed that office of the red that the chan therwise provide the of signed there to comply	egistered ge(s) ded in
tni to no	e obl meri Lifie	ions of all statules relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	gor in C ereby co	napter 603, onfirm that t	, r.s. Or, ij this d he limited liability	ocument is bei y company has	ng jiled been