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(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·			
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Fashionably For Name of Lin	abulous UC nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	age and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
Name of Person	
Registered Agents In	<u>10</u>
3030 N. Rocky Point	C Dr. Sk 150 A 副 B T
Tamoa, FL 33697 City/State and Zip Code	ALLEAN ASSESS FLOREIT
Natvanclarke @ hotmail- E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please of	call:
Nataha Clarke - Bernard	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 amoun	.t:
☑ \$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

	· 			
1. Na	ame of the limited liability company: Fashionably	Fabulous		
2. (a)	Principal office address of limited liability company:	-		ability company:
	(Note: MUST BE STREET ADDRESS)		Y BE POST O	·
	18309 Holland House LP	18309	Hollon	ad House L
	Land O Lakes, FL 34638	Land 0	Lak	es, FL 346
	1/10/2015	_150000	028	73
3.	Date of filing/registration in Florida 4.	Document	number	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida De	pt. of State:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	100			
	18309 Holland House LP			
	Land 0 Lakes, FL 34	<u>638</u> ££	2016	
(b)	Registered Agents Inc.		JAN	
	Enter name of NEW Registered Agent and/or NEW Registered Office address	<u>ss</u> : £2.5 £2.5 £2.5 £3.5 £3.5 £3.5 £3.5 £3.5 £3.5 £3.5 £3		
	REGISTERED AGENTS INC.		• •	
	NEW Registered Office Address:			
	3030 N. Rodky Point Dr	Ste 15	OA	
-	Tampa ,FL 336	207		
the cha agent v was/we	limited liability company is not organized under the laws of the Sta ange or changes are made, the Florida street address of the register will be identical. Or, in the case of a Florida limited liability comp were authorized by an affirmative vote of the members of the limited ticles of organization or the operating agreement of the limited liab	red office and the bu pany, it is hereby co d liability company	usiness offic infirmed that	e of the registered the change(s)
2/		Hasha Cla	rke - f	Sernard ignee
provisi the obl to mere	eby accept the appointment as registered agent and agree to act in sions of all statutes relative to the proper and complete performanc oligations of my position as registered agent as provided for in Cha rely reflect a change in the registered office address, I hereby confi al in writing of this change.	this capacity. I fur se of my duties, and opter 605, F.S. Or, irm that the limited	ther agree to I am familio if this docun liability con	o comply with the or with and accept nent is being filed npany has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Bill Havre/Assistant Secretary

Signature of Registered Agent