

U5000033351

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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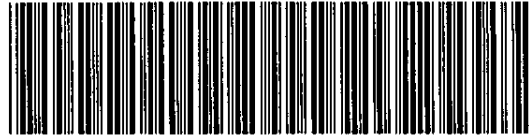
(Business Entity Name)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** OUR GATHERINGS, 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:

GRETCHEN A. DEMPS SIMMONS

\_\_\_\_\_  
Name of Person

OUR GATHERINGS, LLC

\_\_\_\_\_  
Firm/Company

P. O. BOX 681417

\_\_\_\_\_  
Address

ORLANDO, FL 32868-1417

\_\_\_\_\_  
City/State and Zip Code

OURGATHERINGS@YAHOO.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GRETCHEN DEMPS SIMMONS

at ( 407 )

968-9387

\_\_\_\_\_  
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

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy