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SECRETARY OF STATE

1. HAMPTON

COVER LETTER

TO: Registration Section 5. 5. Division of Corporations	
SUBJECT: Pink Cotton Name of Limited	Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change an	nd fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	ne following:
Nicollette Crowley Name of Person	
Pink Cotton Firm/Company	
2900 NW 10th Ave Address	
Withon Manors FL 33311 City/State and Zip Code	
Pink Cotton IIC @ Gmoil.com E-mail address: (to be used for future annual report not	ification)
For further information concerning this matter, please call:	
Nicollette Crowley at (56) Name of Person	Area Code & Daytime Telephone Number
Registration Section R Division of Corporations D Clifton Building P	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Callahassee, 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. Na	ame of the limited liability company: Pink Cotton, LLC
	Principal office address of limited liability company: (b) 7900 NW 10 th Ave Mailing address of limited liability company:
	(<u>Note: MUST BE STREET ADDRESS</u>) (<u>Note: MAY BE POST OFFICE BOX</u>)
	Wilton Manors, FL 33311 Wilton Manors, FL 33311
	03-02-2015 4500037951
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Corporation Service Company
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	1201 Hays Street
	Registered Office Address MUST BE FLORIDA STREET ADDRESS
	Tallahassee ,FL 32301
	Brent Hagey
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	Table of NEW Registered Agent and/or NEW Registered Office address.
	2900 NW 10th Ave
	NEW Registered Office Address:
	Wilton Manors ,FL 3331/
	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
	nge or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
was/we	ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
ine arii	cles of organization or the operating agreement of the limited liability company.
Signat	upe of a member or authorized representative of a member Printed or typed name of signee
I herel provision the obli to mere	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the cons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ly reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.
Signatur	c of Registered Agent