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(ке	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
_				
				
(Bu	siness Entity Name	e)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations				
SUBJI	Bailey Sales Associates LLC				
	Name o	f Limite	d Liability	Company	
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Office	Change	and fee(s)	are submitted for filing.	
Please	return all correspondence concerning this m	latter to	the follow	ing:	
Wend	ly King				
	Name of Person				
Bailey	Sales Associates				
	Firm/Company				
1404	SW 53 Terrace				
	Address				
Cape	Coral, FL 33914				
	City/State and Zip Code				(43
swma	rina@comcast.net				(10) (10)
E	-mail address: (to be used for future annual	report n	otification)	<u>.</u>
For fur	ther information concerning this matter, plea	ase call:			7
Wend	y King	239	74	7-5659	9: 33
	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		Registration Division of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314	
	Enclosed is a check for the following amo	ount:			
	■ \$25 Filing Fee		\$55 Filin	g 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.

Na	me of the limited liability company: Bailey Sales A	ssocia	ates			
(a)	1404 SW 53 Terrace	 (b	1404 S	104 SW 53 Terrace		
,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	June 3 2015	-	 L150000	97123		
	Date of filing/registration in Florida	4.		Document number		
(a)	Cheyenne Moseley					
()	Registered Agent and Registered Office shown on the records of the 13302 Winding Oak Court	e Florida	Dept, of Stat	 te:		
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS	7	_		
	Tampa gr 3	3612				
υ,	Wendy King Enter name of NEW Registered Agent and/or NEW Registered Of 1404 SW 53 Terrace NEW Registered Office Address:	Office add	dress:	Security to the second		
	Cape Coral FL_3	3914	_	9: 33		
har t w wei rtic	mited liability company is not organized under the laws age or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of less of organization or the operating agreement of the limited amember or authorized representative of a member	ne regis ility co the limi mited li	tered office mpany, it i ited liabilit iability con	e and the business office of the register s hereby confirmed that the change(s) y company or as otherwise provided in		
				acity. I further agree to comply with th		