## L15000102739

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PICK-UP	☐ WAIT	MAIL
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Special Instructions to Fil	ing Officer;	
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2020 SEP 14 PM 5: 25

25/10/20

## **COVER LETTER**

TO:	Registration Section Division of Corporations						
SUBJ	For Keeps Engraved, LLC ECT:		•				
3000		Name of Limited Liability Company					
Dear S	ir or Madam:						
The er	closed Registered Agent/Registered	Office Change as	nd fee(s) are submitted for filing.				
Please	return all correspondence concerning	g this matter to th	ne following:				
Jessica	Lee						
	Name of Person						
For Ke	eps Engraved, LLC						
***************************************	Firm/Company						
2260 K	earney Ave						
	Address						
Naples	, FL 34117						
	City/State and Zip Cod	le					
info@v	wearstatementpeace.com						
Ī	E-mail address: (to be used for future	annual report no	tification)				
For fu	rther information concerning this ma	tter, please call:					
Jessica	Lee	239 at (	265-0549				
	Name of Person		Area Code & Daytime Telephone Number				
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the follow	ring amount:					
	□ \$25 Filing Fee	0	\$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. N	Tame of the limited liability company:  For Keeps En	igraved, LLO						<del></del>
2. (a)	C		(b)					
,	Principal office address of limited liability company  (Note: MUST BE STREET ADDRESS)	;	<b>\</b> -,	Mailin	ig address of li te: MAY BE I	mited liability	v compa	ny:
	2260 Kearney Ave			2260 Kearney A	ve			
	Naples, FL 34117	<del></del>		Naples, Fl 3411	7			
	06-12-2015		L	.15000102739				
3.	Date of filing/registration in Florida	4.	_	Doci	ument numb	er		-
5. (a	)							
. (u	Registered Agent and Registered Office shown on the record	ds of the Flori	da l	Dept. of State:				
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDRE.	55)				_	•
	17500 Duquesne Rd						2020	
	Fort Myers	. FL 33967					2020 SEP	
(b)	Enter name of NEW Registered Agent and/or NEW Regist	tered Office :	ıdd	ress:		SSEE, FL	PM 5: 26	
	NEW Registered Office Address:							
	2260 Kearney Ave							
	Naples	, FL						
chang agent was/w	limited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite were authorized by an affirmative vote of the membericles of organization or the operating agreement of	f the registe ed liability of ers of the li the limited	rec con mii Hia	l office and the npany, it is here ted liability com ability company	business off by confirmation by confirmation but the business of the business	fice of the i	registe change	red (s)
Cim	ature of a member or authorized representative of a member	- Jes	ssic	a Lee	ed or typed na			
I here provis the ob- to me notifie	eby accept the appointment as registered agent and sions of all statutes relative to the proper and compoligations of my position as registered agent as provely reflect a change in the registered office addrested in writing of this change.  The property of this change is the registered of the change in writing of this change.  The property of Registered Agent	agree to ac lele perforn vided for in s. I hereby (	ct i nar Cl cor	n this canacity	I further as	oree to con	iply wi in and is being thas b	th the accept g filed ecn
	Division of Corporations P.	O. Box 63:	27	Tallahassee,	FL 32314			

**FILING FEE: \$25.00**