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2016 MAR 29 A ID: 47
SECRETARY OF STATE,
ALLAHASSEE FINDIN,

HAR SO 2016

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT:		
Name of Limit	ted Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change	e and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to	o the following:	
Peter A. DiSalvo.		
Name of Person	· .	·
DiSalvo And Company, P.A.		
Firm/Company		
1945 20th Street		
Address		2016 HAR SECRETA
Vero Beach, FL 32960		MAR 29 A CRETARY OF
City/State and Zip Code		29 ARY 0
flannualreports@disalvocpa.com		
E-mail address: (to be used for future annual report	notification)	A ID: 47 OF STATE
For further information concerning this matter, please cal	l:	
Peter A. DiSatvo at (770-6008	
Name of Person	Area Code & Daytime Telepho	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		·
2 \$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	me of the limited liability company: Aroma Cons	sulting,	LI	LC				
2. (a)	Principal office address of limited liability company:	((b))				
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			1		iress of limit <u>IAY BE PO</u>		ity company: ICE BOX)
		8112 Westfield Circle			1945 20	th Stree	et ·		
		Vero Beach, FL 32966			Vero Be	ach, FL	32960		
		06/15/2015			L150001(03 <i>\</i> 62			
3.		Date of filing/registration in Florida	 4.	-	L 13000 10		nt number	•	
5. ((a)							•	
٥. ١	,	Registered Agent and Registered Office shown on the records of	of the Florid	da	Dept. of State	- c:			
		United States Corporation Agents, Inc							
		Registered Office Address (MUST BE FLORIDA STREET	TADDRES	25)		-			
		13302 Winding Oak Court Suite A							
		Tampa , F	, 33612	2		-			
						_			
(1	۶(d	Enter name of NEW Registered Agent and/or NEW Registers	100			-	<u>≥</u> SE	2016	
		Enter name of NEW Registered Agent and/or NEW Registers	ed Office n	aa	ress:	,	ECRE	MAH	13
		DiSalvo And Company, P.A.					ASA		T,
		NEW Registered Office Address:				-	333 CX	29	i j
		1945 20th Street					mg.	\triangleright	-
						•	55	\Box	
		Vero Beach	L 32960)			ORIDA	Lh Ö	
the cagen was/the a	t we ortic	mited liability company is not organized under the lange or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cless of organization of the operating agreement of the une of a member or authorized representative of a member of accept the appointment as registered agent and agents of all statutes relative to the proper and complete gations of my position as registered agent as providity reflect a change in the registered office address.	of the reg liability of of the line e limited	ist cor ni li	tered office mpany, it is ted liability ability com	e and the shereby of company pany. Printed or active I for	hereby cobusiness confirmed by or as of	office of that the herwise of signe	f the registered e change(s) e provided in c
nonk	jed	Tin writing of this change.	,		-			-	
Sign	atur	e of Registered Agent							
									. -

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

INHS18 (2/14)