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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: 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:		
Name of Person		
Firm/Company		
7119 pindle Tree Lane		
CITY/State and Zip Code	2016 NAY SEČRETA TALLAHA	SAF HERMO
E-mail address: (to be used for future annual report notification)	-3 A K	
For further information concerning this matter, please call:	IO: 52	
Name of Person at (352), 727-249 Area Code & Daytime Teleph		
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:		

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

INHS [8 (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. Name of the limited liability company: Nicele Henry / (C
510 164101 1000 GIQ 164101/1000
2. (a) Principal office address of limited liability company: (b) II O TO WE! (Company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
1 . 0/1 = 7/1/27 10 d a (/a +/7/1/)
Land Olakes, FL 59657 Lunu O Cares, FL 596
7/1/2/15
3. Date of filing/registration in Florida 4. Document number
5. (a) Lega Inc Corporate Services Inc
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
5237 SUMMER IN COMMUNS STE 400
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Tool Michel
FUTTINES ,FL 2570 4 652 1
(b) Anthony Gordon
Enter name of NEW Registered Agent and/or NEW Registered Office address:
6215 gw 81st St
NEW Registered Office Address:

Bainewille , FL 32600
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
Man Moole tenn 1
Signature of a member of authorized representative of a member Printed or typed name of signee
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.
Signature of Registered Agent

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