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Electronic Filing Cover Sheet

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(((H17000312692 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500 Fax Number : (702)866-2689

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Email Address: documents @incorp. Com

LLC REGISTERED AGENT CHANGE STELLA RELLA LLC

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Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

Division of Corporations	54	-U- D-U	- 11.0	
SUBJECT:		ella Rell	<u></u>	
	Mante of L	iminten 17	iability Company	
Dear Sir or Madam:				
The enclosed Registered Agent/Re	gistered Office Ch	ange and	fee(s) are submitted for	or filing.
Please return all correspondence of	oncerning this matt	er to the	following:	
Tana Va	ughn			
Name of	Person			<u>.</u>
InCorp Serv	ices, Inc.			
Firm/Con	ipany		_	
3773 Howard Hughes	Pkwy. · Suite 500	s		
Address	; -			
Las Vegas, NV	89169-6014		•	C.
City/State and	Zip Code			
documents @inc E-mail address: (to be used f	or D. COM or future annual rep	ort notif	ication)	
For further information concerning	3 this matter, please	call:		
Tana Vaughn	at (702	、866-2500	
Name of Person			Area Code & Daytin	ne Telephone Number
STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, Florida 3230	role	Reg Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, Florida 3231	4
Enclosed is a check for the	ie following amou	nt:		
☑ \$25 Filing Fee		□ \$5	5 Filing Fee & Certific	ed 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.

	ame of the limited liability company: Stella Rella		
2 (a)	981 HWY 98 EAST STE 3335	_(b) 981 HV	VY 98 EAST STE 3335
	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)		Mailing address of limited bability company; (Note: MAY BE POST OFFICE BOX)
	Destin, FL 32541	Destin.	FL 32541
	08/25/2015	L150001	45737
3.	Date of filing/registration in Florida	٠	Document number
5. (a)	REGISTERED AGENTS INC		
	Registered Agent and Registered Office shown on the records	of the Florida Dept, of Sta	_ tc.
	3030 N. Rocky Point Dr. Ste 150A		
	Registered Office Address (MUST BE FLORIDA STREE	TADDRESS	-
	Tampa	1 33607	_
107	InCorp Services, Inc. Grace name of NEW Registered Agent and/or NEW Registers	ed Office address:	-
107		ed Office address:	-
107	Errice name of NEW Registered Agent and/or NEW Registers 17888 67th Court North NEW Registered Office Address:	32470	- ·
the line changent wi	Erner name of NEW Registered Agent and/or NEW Registered 17888 67th Court North NEW Registered Office Address: Loxahatchee, FL 33470	133470 lws of the State of Flor of the registered office lability company, it is of the limited fiability	orida, it is hereby confirmed that after and the business office of the registered to hereby confirmed that the change(s) by company or as otherwise provided in
the lime channe channe artice	17888 67th Court North NEW Registered Office Address: Loxahatchee. FL 33470 Loxahatchee mited hability company is not organized under the fage or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited be anthorized by an affirmative vote of the members les of organization or the operating agreement of the Court Court of the Court Cou	133470 lws of the State of Flor of the registered office lability company, it is of the limited fiability	orida, it is hereby confirmed that after e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany.
the lim he chan gent wa gent wa he artic Signal I hereby consision of the oblige of th	17888 67th Court North NEW Registered Office Address: Loxabatchee, FL 33470 Loxabatchee	1. 33470 The state of Floring of the registered office tability company, it is not the limited liability con Mark Spaiding	orida, it is hereby confirmed that after and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in apany. Traced or typed same of upace are in county with the

Division of Corporutions P.O. Box 6327 Tuliahassee, FL 32314 FILING FEE: \$25.00

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