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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	Convenient Favors Group, LLC		
		Name of Limited I	iability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered	Office Change and	I fee(s) are submitted for filing.
Please	return all correspondence concernin	g this matter to the	following:
Shanek	a Scay		
	Name of Person	• • • • • • • • • • • • • • • • • • • •	
Conver	nient Favors Group, LLC		
	Firm/Company		
6742 F	prest Hill BLVD #137		
	Address		
West P	alm Beach, FL 33413		
	City/State and Zip Co	de	
contact	us@convenientfavorsgroup.com		
E	-mail address: (to be used for future	annual report noti	fication)
For fur	ther information concerning this ma	tter, please call:	
Shanek	a Seay	800 at (380-0873
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
			Tallaliassee, T.E. 32303
	Enclosed is a check for the follow	ving amount:	
	S25 Filing Fee	<u> </u>	S55 Filing 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.

, .	Convenient Favors Group, LLC		(b) Co	nvenient Favors (Froup, LLC
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)		
	6742 Forest Hill BLVD #137		67-	42 Forest Hill BL	VD #137
	West Palm Beach, FL 33413		We	est Palm Beach, F	L 33413
	12/04/2015		L150	000202654	
(a)	Date of filing/registration in Florida INCORP SERVICES, INC.	4.	<u></u>	Docume	nt number
	Registered Agent and Registered Office shown on the records INCORP SERVICES, INC.	of the Flor	ida Dep	it, of State:	
	Registered Office Address (MUST BE FLORIDA STREAT 17888 67TH COURT NORTH	ET ADDRE	SS)		ZOZO MAR SECREDA
	LOXAHATCHEE	FL33470			9
	Shaneka Seay Enter name of NEW Registered Agent and/or NEW Registered Office address:			<u>. </u>	PH I: 23
	Shaneka Seay				
	NEW Registered Office Address: 6742 Forest Hill BLVD #137				
	West Palm Beach	, FL			
ange as/w as/w e art Signa here rovis ne ob	limited liability company is not organized under the cor changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the member icles of organization or the operating agreement of a member of authorized representative of a member of a without the appointment as registered agent and ions of all statutes relative to the proper and completely reflect a change in the registered agent as provided in office address of in our office address of in ou	the registed liability ers of the the limite	ered o compainited d liabi haneka	any, it is hereby I liability comparility company. Seay Printed of this capacity. In a company duties.	confirmed that the change(s) my or as otherwise provided in or typed name of signee further agree to comply with in