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PICK-UP	MAIT	MAIL	
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ies	Certifica	ates of Status	
tructions to	o Filing Officer:		
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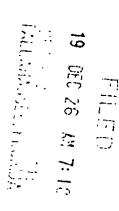
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JAN 27 2020 S. YOUNG



COVER LETTER

gistration Section vision of Corporations	
Moonfall Games LLC	
Name of L	Limited Liability Company
Madam:	
ed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
n all correspondence concerning this matt	
_	U
S	
Name of Person	
imes LLC	
Firm/Company	
ello Circle	
Address	
da 34110	
City/State and Zip Code	
nes@gmail.com	
l address: (to be used for future annual rep	ort notification)
nformation concerning this matter, please	call:
	239 595-7627
Name of Person	Area Code & Daytime Telephone Number
iling Address:	Street Address:
sistration Section	Registration Section
ision of Corporations	Division of Corporations
. Box 6327	The Centre of Tallahassee
ahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
losed is a check for the following amoun	nt:
25 Filing Fee	□ \$55 Filing Fee & Certified Copy
1)	

LIMITED LIABILITY COMPANY

the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company following statement in order to change its registered office or registered agent, or both, in the State of Florida.

of the limited liability company:	Moonfall Games I	LLC					
FII STREET		(b) 39 6TH STREET Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)							
NITA SPRINGS, FL 34134			BONITA SPRINGS, FL 34134				
		_	 				
5/2015			L15000208	1069			
Date of filing/registration in	ı Florida	4.	*	Document numb	per		
es Patrick Beans							
tered Agent and Registered Office sho	wn on the records of t	the Florid	la Dept, of Sta	ite:			
stered Office Address (MUST BE F	FLORIDA STREET A	<u>ADDRES</u>	<u>S</u> j	•			
oth Street					19 DEC		
ita Springs	FL.	34134	_	_	100 -		
	, , , , ,		•••				
name of NEW Registered Agent and	or NEW Registered	Office a	idress:	-			
Z Registered Office Address:				_			
10 Marcello Circle				_			
les	, FL	34110		_			
I liability company is not organianges are made, the Florida street identical. Or, in the case of a I thorized by an affirmative vote of organization or the operating a	eet address of the r Florida limited liab of the members of	register bility co f the lin limited	ed office an ompany, it i nited liabilit liability con	id the business off s hereby confirme ty company or as o	ice of the registered ed that the change(s)		
restricous		Jam ——	es Beans				
a member or authorized representative cept the appointment as register fall statutes relative to the propers of my position as registered decided a change in the registered criting of this change.		ee to act perform I for in C ereby c	t in this cap ance of my Chapter 605 onfirm that	Printed or typed nar acity. I further ag duties, and I am fo 5, F.S. Or, if this of the limited liabilit	-		
egistered Agent							