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| (Req | questor's Name) | | | |
|---|-----------------|-------------|--|--|
| (Add | dress) | | | |
| (Add | lress) | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

| TO: | Registration Section Division of Corporations | | | | |
|---|--|------------------|--|--|--|
| SUBJI | Valmas Investments, LLC | | | | |
| 901701 | · - · · · · · · · · · · · · · · · · · · | e of Limited Li | ability Company | | |
| Dear S | Sir or Madam: | | | | |
| The en | oclosed Registered Agent/Registered Off | ice Change and | fee(s) are submitted for filing. | | |
| Please | return all correspondence concerning th | is matter to the | following: | | |
| Andre | ew Skidmore | | | | |
| | Name of Person | | _ | | |
| Valm | as Investments, LLC | | | | |
| | Firm/Company | , | _ | | |
| 1052 | 4 Sanford Street | | | | |
| | Address | | _ | | |
| River | view, FL 33578-4332 | | | | |
| | City/State and Zip Code | - | | | |
| askid | more07@gmail.com | | | | |
| E | E-mail address: (to be used for future ann | ual report notif | ication) | | |
| For fu | rther information concerning this matter, | please call: | | | |
| Andre | ew Skidmore | 813 | 741-3790 | | |
| | Name of Person | | Area Code & Daytime Telephone Number | | |
| | STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | Re Di P.O | alling address: gistration Section vision of Corporations D. Box 6327 llahassee, Florida 32314 | | |
| Enclosed is a check for the following amount: | | | | | |
| | 2 \$25 Filing Fee | □ \$: | 55 Filing Fee & Certified Copy | | |
| INHSI | 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.

| ime of the limited liability company: | estments, LLC | | | |
|---|--|--|--|--|
| 10524 Sanford Street | (b) 1052 | (b) 10524 Sanford Street | | |
| Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | (0) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON) | | |
| Riverview, FL 33578-4332 | Rive | rview, FL 33578-4332 | | |
| 12/21/2015 | L1500 | 00211371 | | |
| Date of filing/registration in Florida | 4 | Document number | | |
| Remigio Palumbo | | f State: | | |
| Tampa | , 33614-1866 | | | |
| Andrew Skidmore NEW Registered Office Address: | ed Office address: | | | |
| 10524 Sanford Street | | | | |
| Riverview | FL_33578-4332 | | | |
| ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and of | of the registered of liability company s of the limited liability Prevaluation of the limited liability Prevaluation of the limited liability | office and the business office of the registered to it is hereby confirmed that the change(s) bility company or as otherwise provided in company. Printed or typed name of signee capacity: I further garge to comply with the | | |
| | Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS) Riverview, FL 33578-4332 12/21/2015 Date of filing/registration in Florida Registered Agent and Registered Office shown on the records Remigio Palumbo Registered Office Address (MUST BE FLORIDA STREE 2801 W Waters Ave, Ste B Tampa Enter name of NEW Registered Agent and/or NEW Registered Andrew Skidmore NEW Registered Office Address: 10524 Sanford Street Riverview Initiated liability company is not organized under the image or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member increase of organization or the operating agreement of the accept the appointment as registered agent and complete in the registered agent and com | Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS) Riverview, FL 33578-4332 Riverview, FL 33578-4332 Registered Agent and Registered Office shown on the records of the Florida Dept. of Remigio Palumbo Registered Office Address 2801 W Waters Ave, Ste B Tampa FL 33614-1866 Enter name of NEW Registered Agent and/or NEW Registered Office address: Andrew Skidmore NEW Registered Office Address: 10524 Sanford Street Riverview FL 33578-4332 Riverview FL 33578-4332 FL 33614-1866 Registered Office Address: 10524 Sanford Street Riverview FL 33578-4332 FL 33578-4332 Riverview FL 34614-1866 | | |