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COVER LETTER

INHS18 (2/14)

то:	Registration Section Division of Corporations				
SUBJ	Cocoon to Wings Publishing	j, LLC			
2.0.24		ne of Limited L	iability Company		
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to the	following:		
Steph	nanie Outten				
	Name of Person				
Coco	on to Wings Publishing				
	Firm/Company		_		
3444	7 Windknob Court				
	Address				
Wesl	ey Chapel, FL 33545				
	City/State and Zip Code				
coco	ontowings@gmail.com				
F	E-mail address: (to be used for future ann	ual report notif	ication)		
For fu	rther information concerning this matter.	please call:			
Steph	nanie Outten	813	417-9987		
- 100	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.G	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314		
	Enclosed is a check for the following amount:				
	■ \$25 Filing Fee	□ \$:	55 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

1. Na	ame of the limited liability company: Cocoon to Wir	ngs Publishing,	LLC	
2. (a)	34447 Windknob Court	(b) 34447 Windknob Court		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ , ,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Wesley Chapel, FL 33545	Wesley	Chapel, FL 33545	
	January 6, 2016	L160000	04041	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Stephanie N. Outten			
J. (a)	Registered Agent and Registered Office shown on the records of the	he Florida Dept, of Stat	ie:	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	_	
		<u> </u>	_	
	Oviedo . FL	32765	_	
(b)			. 69	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	- VO.1	
	34447 Windknob Court		16	
	NEW Registered Office Address:			
				
			178	
	Wesley Chapel , FL	33545		
the cha agent v was/we the arti Signal I here provisi the obl to mero notified	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the large of a member of authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete properties of a change in the registered office address. In the in writing of this change.	the registered offic bility company, it is f the limited liabilit limited liability con Stephanie N	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in an appany. Outten Printed or typed name of signee Descript I further agree to comply with the	