L160000 25347

(Requestor's Name)									
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(Business Entity Name)									
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COVER LETTER

TO:

Registration Section

Divi	sion of Corporations	-							
SUBJECT:	WESTON DESIGNS LLC								
SOBSECT.	Name of Limited Liability Company								
Dear Sir or M	Madam:								
The enclosed	d Registered Agent/Registered O	ffice Change and fe	ee(s) are submitted for filing.						
Please return	n all correspondence concerning t	his matter to the fo	llowing:						
EUGENE	YAKUSHEV		_						
	Name of Person								
WESTON	DESIGNS LLC								
	Firm/Company		-						
7701 NW	87TH AVENUE								
	Address		-						
TAMARAG	C, FL 33321								
	City/State and Zip Code		-						
GENAYA	KU@GMAIL.COM								
E-mail	address: (to be used for future ar	nual report notific	ation)						
For further i	nformation concerning this matte	r, please call:							
EUGENE	YAKUSHEV	at (414-0010						
	Name of Person	w (Area Code & Daytime Telephone Number						
Regi Divi Clift 266	REET/COURIER ADDRESS: istration Section ision of Corporations ton Building 1 Executive Center Circle ahassee, Florida 32301	Regi Divi: P.O.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:									
2 \$2	25 Filing Fee	\$55	Filing Fee & Certified Copy						
INHS18 (2/14	4)								

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	me of the limited liability company: WESTON DE	ESIGNS	S LLC				
2.		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1180 NW 60TH TERRACE		o)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) V 60TH TERRACE			
		MARGATE, FL 33063		MARGATE, FL 33063				
		02/05/2016		L1600002	25343			
3.		Date of filing/registration in Florida	4.		Document n	number	,	
		Registered Agent and Registered Office shown on the records of EUGENE YAKUSHEV Registered Office Address (MUST BE FLORIDA STREET) 1180 NW 60TH TERRACE						
		MARGATE , FI	33063		_	SEL	101.61	
(b)	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> EUGENE YAKUSHEV NEW Registered Office Address:	d Office ad	ldress:		JUL 25 PN 3: 41 LAHASST TOTORID		
		7701 NW 87TH AVENUE						
		TAMARAC, FI	33321					
the age wa	cha ent w s/we	imited liability company is not organized under the la inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of cles of organization of the operating agreement of the	f the regi iability c of the line limited	istered office ompany, it is nited liability	e and the bus s hereby con y company o npany.	iness offi firmed th	ice of the	the registered change(s)
s	Signature of a member or authorized representative of a member			Printed or typed name of signee				
I h pro the to i not	erel ovisi obli nere ified	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered affice address, I I in writing of this change.	ree to ac e perform ed for in hereby c	t in this cape cance of my c Chapter 605 confirm that	acity. I furth duties, and I i, F.S. Or, if the limited Ii	ner agree am famil this docu iability co	to con lar wi iment i ompan	nply with the th and accept is being filed y has been
Sig	natui	re of Registered Agent						

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00