## 116000026964

(Re	equestor's Name)			
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SECRETARY OF STATE
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D. SCOTT NOV 2 2 2016

## COVER LETTER

TO: Registration Section Division of Corporations	•				
SUBJECT:					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Off	fice Change ar	nd fee(s) are submitted for filing.			
Please return all correspondence concerning th	is matter to th	e following:			
Shana Story					
Name of Person		<del></del>			
HAPPY AGAIN, LLC					
Firm/Company		<del></del>			
132 1st Street East, #105					
Address			TAL SEC		
Tierra Verde, FL 33715					
City/State and Zip Code		<del></del>	ON 21 PM 3 59 ANNSSEE, FLORID		
sdstory15@gmail.com			F ST		
E-mail address: (to be used for future and	nual report no	tification)	987E 97 57		
For further information concerning this matter	, please call:				
Shana Story	727 at (	318-2290			
Name of Person		Area Code & Daytime Telep	hone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	F I F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314			
Enclosed is a check for the following	g amount:				
☑ \$25 Filing Fee		\$55 Filing Fee & Certified Copy			
INHS18 (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.

1. N	lame of the limited liability company: Happy Again	LLC
2. (a)	Hanny Again II C	(b)
2. (a,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	405 Central Avenue, #200	405 Central Avenue, #200
	St Petersburg, FL 33701	St Petersburg, FL 33701
	08-Feb-2016	L16000026964
3.	Date of filing/registration in Florida	4. Document number
5. (a	Shana Story	
٥. (د	Registered Agent and Registered Office shown on the records of	f the Florida Dept. of State:
	Happy Again, LLC	,
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)
	405 Central Avenue, #200	
	St Petersburg , F	L33701
(b	Shana Story	d Office address:
(0	Enter name of NEW Registered Agent and/or NEW Registere	d Office address:
	Happy Again LLC	Some address.
	NEW Registered Office Address:	
	132 1st Street East, #105	
	Tierra Verde , F	L <sup>33715</sup>
the c agent was/the a Sig I her provide to me	hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members rticles of organization or the operating agreement of the matter of a member or authorized representative of a member	aws of the State of Florida, it is hereby confirmed that after of the registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in e limited liability company.  Shana Story  Printed or typed name of signee  gree to act in this capacity. I further agree to comply with the se performance of my duties, and I am familiar with and accept led for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been
Signa	ityre of Registered Agent	

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

INHS18 (2/14)