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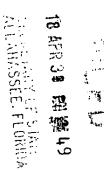
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WAIT	MAIL			
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Special Instructions to Filing Officer:				
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Office Use Only



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J. LEGGETT MAY 01 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 19, 2018

MARY BETH PLANK-MEZO 8571 BUTTERNUT BLVD ORLANDO, FL 32817 US

SUBJECT: LIFE & LEADERSHIP ESSENTIALS, LLC

Ref. Number: L16000067296

We have received your document for LIFE & LEADERSHIP ESSENTIALS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 018A00007983

2018 APR 30 PM 2: 4.3
DEPARTMENT OF STATEMENT OF STATEMEN

COVER LETTER

TO: Registration Section Division of Corporations	
Life & Leadership Essentials, LLC SUBJECT:	
	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
Mary Beth Plank-Mezo	
Name of Person	
Life & Leadership Essentials, LLC	
Firm/Company	
8571 Butternut Boulevard	
Address	
Orlando, Florida 32817	
City/State and Zip Code	
maryb@fullsail.com	
E-mail address: (to be used for future annual repo	rt notification)
For further information concerning this matter, please of	all:
Mary Beth Plank-Mezo 40	07 496-5571
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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount	t :
\$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	fame of the limited liability company: Life & Leade	rship Essentials	, LLC
2. (a)			
(w)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	8571 Butternut Boulevard	8571 E	Butternut Boulevard
	Orlando, Florida	Orland	lo, Florida
	32817	32817	
3.	Date of filing/registration in Florida	4.	Document number
5. (a	L16000067296		
J. (a	Registered Agent and Registered Office shown on the records of	f the Florida Dept. of St	tate:
	United States Corporations Agents, Inc.		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	13302 Winding Oak Ct. Ste A		<u> </u>
	Tampa .F	L33612	Mary 31
			- సై ను
(b)			
	Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	
	Mary Beth Plank-Mezo		
	NEW Registered Office Address:		— — — — — — — — — — — — — — — — — — —
	8571 Butternut Boulevard		_
	Orlando , F	L32817	
the ch agent was/w the art Signa	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cicles of organization or the operating agreement of the large authorized representative of aniember aby accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as providing the reflect a change in the registered office address, I	of the registered offi iability company, it of the limited liability of Mary Beth f	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany. Plank-Mezp Printed or typed name of signee
notijie M	ay in writing of this change. A Bitty Wol-May welof Registered Agent		

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