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(Re	equestor's Name)	
(Ad	ldress)	
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COVER LETTER

Co: Registration Section Division of Corporations			
UBJECT: CINOVICIA'S Croquett & More UC Name of Limited Liability Company			
Dear Sir or Madam:			
he enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
lease return all correspondence concerning this matter to the following:			
Name of Person Firm/Company			
2640 SW 2th St Address			
For Courderdule FL 33312 City/State and Zip Code			
Tun Vorelo Ja Voho con Cindydiar a sa yaha con E-mail address: (to be used for future annual report notification)			
or further information concerning this matter, please call:			
Tun Corlos Uniclo at 305 401 - 4956 Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS: Pagintentian Section Registration Section			
Registration Section Registration Section Division of Corporations Division of Corporations			
Clifton Building P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32314			
Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
\$25 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. Name of the limited liability company: Cyndytellas Croquett & More, UC	
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)	:
abyo sw 8th st abyo sw 8th st	
Fort lauderdule FL 33312 Fort lauderdule FL 333	312
71 - MAY - 3016 Date of filing/registration in Florida L160000 75 79 7 Document number	
1	
5. (a) Legistered 200 MRegistered Agent and Registered Office shown on the records of the Florida Dept. of State:	
WINTED STATES CORPORATION AGENTS, INC. Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
13302 WINDING DAY COURT	
TAMPA, FL , FL 33612	
(b) TUON Corlos Uorclo Enter name of NEW Registered Agent and/or NEW Registered Office address:	
Enter hance of MEN Registered Agent and/or MEN Registered Office Rudities.	
NEW Registered Office Address:	
_ 3040 SN 3M St <u>₩ ₩ ₩ ₹ ₹ ₹ </u>	
Fort lauderdate FL 33312	2001-20 K-
	П
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered of	tered
agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change (swas/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided	s) Iin
the articles of organization or the operating agreement of the limited liability company.	
Signature of a member or authorized representative of a member Printed or typed name of signee	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and a the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has be notified in writing of this change.	i the ccept filed en
Signature of Registered Agent	