116000142542

(F	Requestor's Name)	
(A)	Address)	
(A	Address)	-
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(Ľ	Occument Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	

Office Use Only



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2017 AUG 21 PH 1: 4.9

J. HARRIS

COVER LETTER			
TO: Registration Section Division of Corporations			
SUBJECT: Custom Expressions 1/C Name of Limited Liability Company	_		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fcc(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
HOLL ROSS Name of Person			
Custum Expressions IIc			
17/3 SE 11th Tec,			
Cape Conal FL 33990 City/State and Zip Code			
Drders O Coston Expressions 4 u. cov E-mail address: (to be used for future annual report notification)	h		
For further information concerning this matter, please call:			
HOLY 2055 at (239) 745 - 89 (c 9) Name of Person Area Code & Daytime Telephone Num	_ ber		
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:			
☑ \$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

r tortaa.	·		
		X bressions 11	<u></u>
2. (a) _	1813 SEIITH Ter, Celle Coral, FL 3399 (b)	SAME	
	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)	Mailing address of limited liability comp Onte: MAY BE POST OFFICE BO	•
	1813 SE 11th Tec	FSAME	
	Cape Conal, FL 33990	·	
_	7/29/16 L	- 1600014254	19
3.	Date of filing/registration in Florida 4.	Document number	
5. (a)	United States Corporation Registered Agent and Registered Office shown on the records of the Florida Dept. of		
;	Registered Agent and Registered Office shown on the records of the Florida Dept.	an Acenints inc	_
	United States Corporation Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	the state of the s	
	1813 SE 11th Cer		
	Cepe Conal FL 339	<u>70</u>	
	1611, 0000	A A	T)
(b) _	Enter name of NEW Registered Agent and/or NEW Registered Office address:	AUG 2	100 (21)
		## -	
	Custom Expressions 110	<u> </u>	::
	NEW Registered Office Address:		,
	1813 SE 15th Ter	×	
	Cepe Conal FL 339	390	
	mited liability company is not organized under the laws of the Statenge or changes are made, the Florida street address of the registered		
agent w	rill be identical. Or, in the case of a Florida limited liability compan- re authorized by an affirmative vote of the members of the limited li	 iy, it is hereby confirmed that the change 	ge(s)
	cles of organization or the operating agreement of the limited liabilit	ty company.	aca m
	ADULG KON HO	Printed or typed name of signee	
provision the obligate to merci	ny accept the appointment as registered agent and agree to act in this ons of all statutes relative to the proper and complete performance of gations of my position as registered agent as provided for in Chapte ly reflect a change in the registered office address. I hereby confirm in writing of mis change f	is capacity. I further agree to comply of my duties, and I am familiar with an er 605, F.S. Or, if this document is being that the limited liability company has	with the d accept ng filed been
\	Hally Kald		
Signature	e of Registered Agent		