

L16000165889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

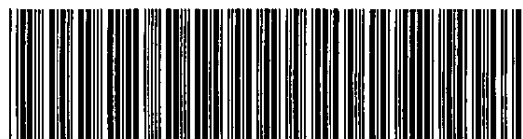
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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June 8, 2017

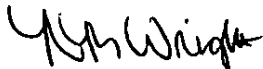
Purple Yogini LLC.
Nina Marie Wright
6833 NW 4th Court
Plantation, FL 33317
(954) 817-9219

To Whom It May Concern:

The enclosed documents are in request for my name change in association with my LLC; name change due to marriage. I am the sole Registered Agent of my company Purple Yogini LLC. Certificate of Status for Purple Yogini LLC was received on September 6, 2016. The document number of the company is L16000165889. Authentication Code associated with certificate of status was: 160909085615-200289845552#1.

Thank you,

Nina Marie Wright

A handwritten signature in black ink, appearing to read "Nina Marie Wright", written in a cursive style.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Purple Yogini LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nina Marie Wright
Name of Person

Purple Yogini LLC
Firm/Company

6833 NW 4th Court
Address

Plantation, FL 33317
City/State and Zip Code

purpleyogini3@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nina Marie Wright at (954) 817 9219
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:

☐ \$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.

1. Name of the limited liability company: Purple Yogini LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

6833 NW 4th Court

Plantation, FL 33317

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

6833 NW 4th Court

Plantation, FL 33317

09/06/2016

3. Date of filing/registration in Florida

L16000165889

4. Document number

5. (a) Nina Marie Stevenson
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

6833 NW 4th Court

Plantation, FL 33317

(b) Nina Marie Wright
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:

6833 NW 4th Court

Plantation, FL 33317

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TALLAHASSEE, FLORIDA

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 agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Nina Marie Wright
Signature of a member or authorized representative of a member

Nina Marie Stevenson Wright
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 the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Nina Marie Wright
Signature of Registered Agent

Certificate of Status

I certify from the records of this office that PURPLE YOGINI, LLC, is a limited liability company organized under the laws of the State of Florida, filed electronically on September 06, 2016, effective September 06, 2016.

The document number of this company is L16000165889.

I further certify that said company has paid all fees due this office through December 31, 2016, and its status is active.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

Authentication Code: 160909085615-200289845552#1

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Ninth day of September, 2016



Ken Detzner
Ken Detzner
Secretary of State