## L1600189318

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## **COVER LETTER**

_	istration Section ision of Corporations			
SUBJECT:	Manley Design, LLC			
0000001		e of Limited L	iability Company	_
Dear Sir or	Madam:			
The enclose	d Registered Agent/Registered Offic	e Change and	I fee(s) are submitted for filing.	
Please retur	n all correspondence concerning this	s matter to the	following:	
Claire Elis	sabeth Manley			
	Name of Person		<del></del>	
Manley D	esign, LLC			
	Firm/Company		<del></del>	
224 NW 2	2nd Avenue, Suite E		\$2 .45 6 *** 	Ž.
	Address		<del></del> ,	: د
Gainesvill	le, FL 32601			ָ ר
	City/State and Zip Code		<del></del>	- .:
emanley@	@manleydesign.net			c. C.
E-mail	l address: (to be used for future annu	ial report notif	fication)	
For further i	information concerning this matter.	please call:		
C. Elisabe	eth Manley	352	363-7412	
	Name of Person		Area Code & Daytime Telephone Numb	er er
Reg Div Clit 266	REET/COURIER ADDRESS: distration Section ision of Corporations from Building 1 Executive Center Circle lahassee, Florida 32301	Re Di P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314	
Enc	closed is a check for the following :	amount:		
<b>2</b> ) \$	325 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.	Na	me of the limited liability company: Manley Desig	ın, LLC		· · · · · · · · · · · · · · · · · · ·		
2.	(a)	224 NW 2nd Avenue, Suite E	(b) 224 NW 2nd Avenue, Suite E				
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	N	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
		Gainesville, FL 32601		Gainesville, FL 32601			
		10/13/2016		.1600018	9318		
3.		Date of filing/registration in Florida	4.		Document numbe	r	
5.	(a)	Claire E. Manley					
	•••	Registered Agent and Registered Office shown on the records of	Dept. of State:	:			
		3462 NW 13th Avenue					
		Registered Office Address (MUST BE FLORIDA STREET)					
						14.5	
		Gainesville	32605				
		, rı,				- ;	•
(b) Claire E. Manley  Enter name of NEW Registered Agent and/or NEW Register  224 NW 2nd Avenue, Suite E		Claire E. Manley					_
		Enter name of NEW Registered Agent and/or NEW Registered	Office addr	CNN:			
		224 NW 2nd Avenue, Suite E				÷	<b>)</b>
		NEW Registered Office Address:				(3) (2)	
		Gainesville, FL	32601				
the age was the	cha nt v s/we arti	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liatere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regist ability corof the limited lia	ered office npany, it is ted liability	and the business hereby confirmed company or as of pany.	office of dithat the	the registered change(s)
		ture of a member or authorized representative of a member	<u> </u>		Printed or typed nam	e of signee	
pro the to i	visi obl ngre	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as providedly reflect a change in the registered office address. It is mitting of this change.	performat d for in Cl	nce of my a hanter 605.	luties, and Lam fa F.S. Or. if this d	ımiliar wi locument	ith and accept is being filed

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

Signature of Registered Agent