

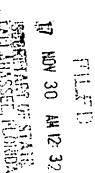
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COVER LETTER

Division of Corporations						
Darobco SUBJECT:						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this	matter to the following:					
Catharina Loevhoej						
Name of Person						
Darobco						
Firm/Company						
612 st. Henry drive						
Address						
33511 Brandon						
City/State and Zip Code						
darobco@gmail.com						
E-mail address: (to be used for future annua	al report notification)					
For further information concerning this matter, p	lease call:					
Catharina Loevhoej	813 8488270					
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					
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.

. Na	me of the limited liability company:	_		
	3875 US HWY 301		_(h) 612 st	t. Henry dr.
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ '		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Riverview		Brand	-
	FL 33578	_	FL 33	
	12 33370	_		311
	10/26/2016		L16000	0198010
	Date of filing/registration in Florida	4.		Document number
. (a)	Legalinc corporate services inc			
	Registered Agent and Registered Office shown on the records of t	he Flori	da Dept. of S	State:
	5237 SUMMERLIN COMMONS			
	Registered Office Address (MUST BE FLORIDA STREET A STE 400	<u> </u>		
	FORT MYERS EL	33907	7	
	, ; ; ;		-	30 30 30 SSE
(b)				
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	Photo Paris
	Catharina Loevhoej			17. 17. 32 18. 18. 18. 18. 18. 18. 18. 18. 18. 18.
	NEW Registered Office Address:			
	612 St. Henry drive			<u> </u>
	Brandon	3351°	1	
ie cha gent w ras/we ne arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia realthorized by an affirmative vote of the members of of organization or the operating agreement of the member or unhorized representative of a member or accept the appointment as registered agent and agreement of all statutes relative to the proper and complete in the proper and complete in the registered agent as provided by affect a change in the registered office address. I have	the regability of the limited	gistered off company, i mited liabi l liability c atharina l	fice and the business office of the registered it is hereby confirmed that the change(s) filtry company or as otherwise provided in company. Loevhoej Printed or typed name of signee
T	on writing of this change.	l fór in iereby	Chaptér 6 confirm th	105, F.S. Or, if this document is being filéa at the limited liability company has been
ignatu	E of Registered Agent			
	Division of Corporations• P.O. B			hassee, FL 32314

INHS18 (2/14)