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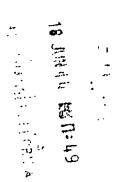
				
(Red	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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JUN 1 3 2018

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	Neighborhood Concierge L	LC	
	Nai	ne of Limited	l Liability Company
Dear Si	ir or Madam:		
The end	closed Registered Agent/Registered Of	fice Change a	and fee(s) are submitted for filing.
Please	return all correspondence concerning th	nis matter to t	he following:
Richa	rd C. Coiro		
	Name of Person		
Neigh	borhood Concierge LLC		
	Firm/Company		
11950	Charlton Lane		
	Address		
Orland	do, Florida 32827		
	City/State and Zip Code		
coiro@	Dusta.com		
E-	-mail address: (to be used for future ani	nual report no	otification)
For furt	ther information concerning this matter	, please call:	
Richa	rd C. Coiro	914 at (233-4864
-	Name of Person	u. (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		
	☑ \$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.

1. Ni	ame of the limited liability company: Neighborhoo	d Concierg	e LLC
<u> </u>	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)	(\(\frac{1}{2}\)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	11950 Charlton Lane	11	950 Charlton Lane
	Orlando, Florida 32827	Or	rlando, Florida 32827
	November 21, 2016	L16	6000213104
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	United States Corporation Agents, Inc.		
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept	t, of State:
	Cheyenne Moseley c/o Legal Zoom		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	13302 Winding Oak Court		
	Tampa	33612	
(b)	Richard C. Coiro		
ν-,	Enter name of NEW Registered Agent and/or NEW Registered	l Office address:	
	Richard C. Coiro		
	NEW Registered Office Address:		
	11950 Charlton Lane		——————————————————————————————————————
	Orlando	32827	
he cha gent v vas/we	imited liability company is not organized under the lainge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the registered ability compa of the limited Imited liabil	d office and the business office of the registere my, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company.
/ / V	ture of a member or authorized representative of a member	Maria D	Printed or typed name of signee
- Lherel	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide Ty reflect a change in the registered office address. I	ree to act in the performance ed for in Chap	his capacity. I further agree to comply with th

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

gnature of Registered Agent