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(Requestor's Name)					
(Address)					
(Address)					
(City	y/State/Zip/Phone	e#)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
		,			

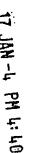
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COVER LETTER

то:	Registration Section Division of Corporations	_		
arın r	Wardrobe By Robyn, LLC	`		
SUBJ		ne of Limite	d Liability Company	
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered Of	fice Change	and fee(s) are submitted for filing.	
Please	return all correspondence concerning the	nis matter to	the following:	
Roby	n Hambsch			
	Name of Person			
Ward	frobe By Robyn, LLC			A
	Firm/Company			17 J
1207	SW 50th Street			17 JAN -4
	Address			L PH
Саре	e Coral, FL 33914			ի կ։ կն
·	City/State and Zip Code			Ċ
ward	robebyrobyn@gmail.com			
	E-mail address: (to be used for future an	nual report r	otification)	
For fu	rther information concerning this matter	, please call	:	
Roby	n Hambsch	239	677-7317	
	Name of Person	at (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	g amount:		
	☑ \$25 Filing Fee	C	\$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: Wardrobe By	Robyr	٦,	LLC	
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		1207 SW 50th Street			1207 SW	/ 50th Street
		Cape Coral, FL 33914	_	•	Cape Co	ral, FL 33914
		12/05/2016			L1600022	20333
3.		Date of filing/registration in Florida	4.			Document number
5.	(a)	Registered Agent and Registered Office shown on the records of Robyn Hambsch Registered Office Address (MUST BE FLORIDA STREET) 1207 SW 50th Street	the Florid		Dept. of State:	
			33914	1		JN -4
		Enter name of NEW Registered Agent and/or NEW Registered Robyn Hambsch NEW Registered Office Address:	Office a	<u>ıbb</u>	r <u>ess</u> :	5
the (cha	, FL imited liability company is not organized under the lavinge or changes are made, the Florida street address of	ws of the	ist	ered office	and the business office of the registered
was	/we arti	vill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the ture of member of authorized representative of a member	of the lin	mit lia	ted liability	company or as otherwise provided in
I he prov the to m noti	erel visi obl nere fied	by accept the appointment as registered agent and agricology of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I din writing of this change.	ree to ac perforn d for in hereby c	et i nar Cl cor	in this capa nce of my d hapter 605, nfirm that t	city. I further agree to comply with the
8iar	(atur	Division of Cornerations P.O. I	Roy 637	74	. Tallahass	see FI 3231 <i>4</i>

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