LM0000 60868

(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



700339555617

01/23/20--01012--018 **25.00

020 JAN 23 AM 7: 07

FEB 2 0 2020

S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: The Red Co Hage. Com Dame of Limited	De Sign, LLC Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change an	nd fee(s) are submitted for filing
	•
Please return all correspondence concerning this matter to the	e following:
Brian K. Eicholtz Name of Person	
The Red Co Hage Com Design, LCC	
14 Oxford Lane Address	
Palm Coast, FL.32137 City/State and Zip Code	
Heather 2 The Red Cottage. Com E-mail address: (to be used for future annual report not	ification)
For further information concerning this matter, please call:	
Brian Eicholtz at (614) Name of Person	e) 218 · 5123 Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
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.

1. N	ame of the limited liability company: The Red_	CoHap	e.com	Design, LL	<u></u>	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	•	/ <u>/</u> Ma	OX ford (iling address of limite Note: MAY BE POS	Lane ed liability con	
	Palm Coast, FL. 32137		_	n Coast,		
	March 16,2017		L170	0000 6080	.8	
3.	Date of filing/registration in Florida	4.		ocument number		,
5 (a)	Brian K. Eicholtz					
(u)	Registered Agent and Registered Office shown on the records of t	he Florida De	pt. of State:			
	44 Columbia Lane				202	
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)		55 125	2020 JAN 23	77
				2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-	海之 >	
	Palm Coast .FL	3213	7	(n (n (n	13 A	Ē
(b)	Pam Stallings Enter name of NEW Registered gent and/or NEW Registered	Office addre		• 	M 7:07	
	met hante of MEW Registered agent and/of MEW Registered	Ome aggre	23.		_	
	Pan Stallings					
	NEW Registered Office Address:					
	14 Oxford Lane					
	Palm Coast .FL	3513.	Z			
change agent was/w the art	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law of a member or authorized representative of a member	registered (bility comp f the limite limited liab	office and the sand the sany, it is he disability compa	he business office ereby confirmed to company or as oth	of the regineration of the characteristic proving the characteristic provin	stered nge(s)
I here provis the ob to mer	by accept the appointment as registered agent and agra- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I h	ee to act in performanc l for in Cha iereby conf	this capaci re of my dut upter 605, F irm that the	ity. I further agre ties, and I am fam S.S. Or, if this doo I limited liability o	ee to comply uiliar with a cument is be company ha	with the nd accept ring filed s been

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

notified in writing of this change.

Signature of Registered Agent

Stallings