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SECRETARY OF STATE

D. BRUCE APR 26 2017

COVER LETTER

TO:	Registration Section Division of Corporations		•••	•				
SUBJ		······································		·				
Name of Limited Liability Company								
Dear S	Sir or Madam:							
The er	nclosed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for fi	ling.				
Please	return all correspondence concerning thi	s matter to the	following:					
Danie	el Anderson							
	Name of Person		_					
Tean	LGBTQ LLC							
	Firm/Company	vet 4************************************						
2637	E Atlantic Blvd #41409							
	Address							
Pomj	oano Beach, FL 33062							
	City/State and Zip Code			Ä.	3			
djand	lerson4193@gmail.com							
I	E-mail address: (to be used for future ann	ual report notif	fication)	AFE TA	T			
For fu	rther information concerning this matter,	please call:		24 P	m			
Danie	el Anderson	520 at (2405939	FST W				
	Name of Person		Area Code & Daytime 1	relegione Numbe	r ·			
	STREET/COURIER ADDRESS: Registration Section	Re	AILING ADDRESS: egistration Section		,			
	Division of Corporations Clifton Building		vision of Corporations O. Box 6327					
	2661 Executive Center Circle		llahassee, Florida 32314					
	Tallahassee, Florida 32301							
	Enclosed is a check for the following	amount:						
	☑ \$25 Filing Fee	□ \$:	55 Filing Fee & Certified (Сору				

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	ume of the limited liability company: Team LGBTQ	LLC			
2.	(a)	2637 E Atlantic Blvd #41409		2637 E A	Atlantic Blvd #41409	-
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (Mailing address of limited liab	
		Pompano Beach, FL 33062	_	Pompano	Beach, FL 33062	
		04/03/2017	-	L1700007	4404	
3.		Date of filing/registration in Florida	4.]	Document number	
5.	(a)	Daniel Anderson				
		Registered Agent and Registered Office shown on the records of the 431 Central Ave	e Florid	a Dept. of State:	:	
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRES.	2)		
					#	
		Sarasota _{FI} 3	34236			
	(b)	Daniel Anderson			APR 24 RETARY AHASSE	
	` '	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office ad	dress:	``m [™]	T P
		2637 E Atlantic Blvd #41409			WIS W	
		NEW Registered Office Address:			5	
		Pompano Beach , FL	33062			
the age	e cha ent v is/we	imited liability company is not organized under the laws inge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regi pility co the lin	stered office ompany, it is nited liability	and the business office hereby confirmed that to company or as otherwise	of the registered he change(s)
		Hours anderson	Da	niel Anders		
Ill pro the to no	nere ovisi obl mere tified	ture of a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I he d in writing of this change. Similary The of Registered Agent	e to ac perform for in ereby c	t in this cana	Printed or typed name of signacity. I further agree to duties, and I am familiar F.S. Or, if this docume he limited liability comp	comply with the