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SECRETARY OF STATE
TALLAHASSEE, FI ORIO

K. SALY JUN - 6 2017

COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Divi	sion of Corporations			
SUBJECT:	StageWorks By Corinne, LLC			
SCHOLCI.	Name of Limited Liability Company			
Dear Sir or N	Madam:			
The enclosed	d Registered Agent/Registered Office Cl	hange and fe	e(s) are submitted for filing.	
Please return	all correspondence concerning this mat	tter to the fol	llowing:	
Corinne El	lizabeth Ayers			
	Name of Person			
StageWorl	ks By Corinne			
	Firm/Company		•	
18303 Elm	nhurst Lane			
	Address		•	
Tampa, Fl	_ 33647			
	City/State and Zip Code	.,	•	
stagework	sbycorinne@gmail.com			
E-mail	address: (to be used for future annual re	port notifica	tion)	
For further in	nformation concerning this matter, pleas	e call:		
Corinne Ay	yers at	813	503-0330	
	Name of Person	1	Area Code & Daytime Telephone Number	
Regi Divis Clift 2661	SEET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301	Regis Divis P.O. 1	LING ADDRESS: Attration Section ion of Corporations Box 6327 hassee, Florida 32314	
Encl	osed is a check for the following amo	unt:		
2 \$2	25 Filing Fee	□ \$55	Filing Fee & Certified Copy	

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. 1	Jame of the limited liability company: StageWorks By	y Corir	nne, LLC
2. (a	18303 Elmhurst Ln	(b	18303 Elmhurst Ln
2. (u	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Tampa, FL 33647	-	Tampa, FL 33647
	4/28/17		L17000094618
3.	Date of filing/registration in Florida	4.	Document number
5. (a	UNITED STATES CORPORATION AGENTS	, INC.	
	Registered Agent and Registered Office shown on the records of the 13302 WINDING OAK COURT A Registered Office Address (MUST BE FLORIDA STREET AL		
	TAMPA , FL 3	3612	SEC.
(b	Corinne Elizabeth Ayers		
(0	Enter name of NEW Registered Agent and/or NEW Registered O	ffice add	
	18303 Elmhurst Lane		AM 11: 47 OF STATE E. FLORIO
	NEW Registered Office Address:		RIOA
	Tampa , FL_3	3647	
the chagent was/v	limited liability company is not organized under the laws ange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liab were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the limited limited.	ne regis ility co the limi mited li	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
	ature of a member or authorized representation of a member		Printed or typed name of signee
provi the oi to me notifi	eby accept the appointment as registered agent and agree sions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address, I held in writing of this change. Where of Registered Agent	e to act erforma for in C reby co	tin this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been

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