## L17000122056

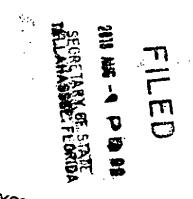
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Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations					
Basique LLC SUBJECT:					
<del></del>	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Reg	gistered Office Change and	f fee(s) are submitted for filing.			
Please return all correspondence co	ncerning this matter to the	following:			
Quentin Davy					
Name of Pe	erson				
Basique LLC					
Firm/Comp	pany	<u> </u>			
310 E. Ashley Street					
Address					
Jacksonville, FL 32202					
City/State and	Zip Code	<del></del>			
admin@justbasique.com					
E-mail address: (to be used for	r future annual report noti	fication)			
For further information concerning	this matter, please call:				
Quentin Davy	904 at (	307-7755 )			
Name of Person		Area Code & Daytime Telephone Number			
STREET/COURIER ADI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, Florida 32301	Re Di P.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. Florida 32314			
Enclosed is a check for th	e following amount:				
<b>☑</b> \$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 Ma	me of the limited liability company:		
2. (a)	Basique LLC	(h	Basique LLC
Σ. (α)	Principal office address of limited fiability company:  (Note: MUST BE STREET ADDRESS)  310 E. Ashley Street,	(0	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  310 E. Ashley Street,
	Jacksonville FL 32202	_	Jacksonville FL 32202
	06/05/2017		L17000122056
3. 5. (a)	Date of filing/registration in Florida  Quentin Davy	4.	Document number
J. (a)	Registered Agent and Registered Office shown on the records of 221 N. HOGAN ST. #392	the Florida	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS,	
	Jacksonville FL	32202	
(b)	Quentin Davy		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	ress:	
	310 E. Ashley Street,		
	NEW Registered Office Address:		,
	Jacksonville, FL	32202	
the cha agent w was/we	mited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	the regis ability co of the lim	tered office and the business office of the registered mpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company.
Sionat	ure of a member or authorized representative of a member		Printed or typed name of signee
I herek provisit the obli to mere notifica	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	ee to act performa I for in C iereby co	in this capacity. I further agree to comply with the