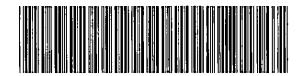
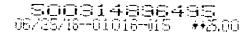
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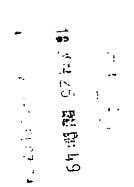
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
WAIT	MAIL				
(Business Entity Name)					
(Document Number)					
Certificates of State	tus				
Special Instructions to Filing Officer:					
	(Address) (Address) (City/State/Zip/Phone #) WAIT (Business Entity Name) (Document Number) Certificates of Sta				

Office Use Only



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JUN 2 6 2016

COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations	, J
SUBJECT: LITTLE LOVE BUGGY LL	_C
N	lame of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
ELLIE STARLING	
Name of Person	
LITTLE LOVE BUGGY LLC	
Firm/Company	
14271 FLORA LANE	
Address	
WELLINGTON, FLA 33414	·
City/State and Zip Code	:
denababy@comcast.net	
E-mail address: (to be used for future a	nnual report notification)
For further information concerning this matter	er, please call:
Sandra Copland	cell 561722-2119
Name of Person	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	ng amount:
☑ \$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.

. Na	ame of the limited liability company: LITTLE LOVE	BUGG	Y, LLC				
(a)	14271 FLORA LANE, WELLINGTON ,FL	(b	14271	FLORA LANE	, WELL	INGTO	DN,FL
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of I		limited liability company: POST OFFICE BOX			
		_	-				
	MARCH 19,2018		_17000 ⁻	143508			
(a)	Date of filing/registration in Florida	4.		Document num	ber "	75	
(a)	Registered Agent and Registered Office shown on the records of CORPORATE CREATIONS NETWORK, IN		Dept. of Sta	nte:	: :	はない。	
	Registered Office Address (MUST BE FLORIDA STREET) 11380 PROSPERITY FARMS RD #221E	(DDRESS)		_	* * * * * * * * * * * * * * * * * * *	器等	:
	PALM BEACH GARDENS, FL	34410				. 19	
	Enter name of NEW Registered Agent and/or NEW Registered SANDRA L COPLAND NEW Registered Office Address: 617 WEST RAMBLING DRIVE						
	WELLINGTON .FL	FLA		_			
ent was/we	mited liability company is not organized under the law nige or changes are made, the Florida street address of fill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of these of organization or the operating agreement of the lie strategy are of a member or authorized representative of a member	es of the S the registability cor f the limi limited li	ered office npany, it red liabilitability obility co	ce and the busines is hereby confirm ty company or as	ss office of ned that the otherwis	of the re he chang se provid	gistered re(s)
hereb ovisio obli mere tified	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.						vith the d accept ng filed been

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