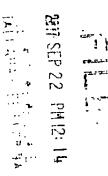
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Office Use Only



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J. HARRIE

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	Delray Legal Services, LLC						
50501	Name of Limited Liability Company						
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Joel N	∕l Weiner						
Name of Person							
Delray Legal Services							
Firm/Company							
4883 S Citation Drive, Unit 101							
	Address						
Delray Beach/Florida 33445							
City/State and Zip Code							
lawoffice3558@gmail.com							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Joel N	/I Weiner	561	, 413-7742				
	Name of Person	at (Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS:		MAILING ADDRESS:				
Registration Section Division of Corporations			Registration Section Division of Corporations				
Clifton Building		F	P.O. Box 6327				
	2661 Executive Center Circle Tallahassee, Florida 32301	7	Callahassec, Florida 32314				
Enclosed is a check for the following 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.

1.	Na	me of the limited liability company: Delray Lega	l Services, L	LC		
2	(a)	4883 S Citation Drive, Unit 101	(b) 48	(b) 4883 S Citation Drive, Unit 101		
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		Delray Beach, Florida 33445	De	Delray Beach, Florida 33445		
		July 27, 2017	L17	000160689		
3.		Date of filing/registration in Florida	4.	Document number		
5.	(a)	Joel M Weiner				
		Registered Agent and Registered Office shown on the records of 7236 Promenade Drive	. of State:			
		Registered Office Address (MUST BE FLORIDA STREET	- cu			
		Unit J501	ent.			
		Boca Raton	_L 33433	S S S S S S S S S S S S S S S S S S S		
			,			
	(b)					
		Enter name of NEW Registered Agent and/or NEW Registered	ed Office address:	12:14		
		4883 S Citation Drive				
		NEW Registered Office Address:				
		Unit 101				
		Delray Beach	L_33445			
the	e cha ent v is/we e arti	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the registered liability compa s of the limited	d office and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company. Weiner		
	-	ture of Immiber or authorized representative of a member		Printed or typed name of signee		
pr the to no	ovisi e obl merc tified	by accept the appointment as registered agent and a ons of all statutes relative to the proper and completigations for my position as registered agent as providely reflect a change in the registered office address, if in writing of this change.	te performance led for in Chap	of my duties, and I am familiar with and accept ter 605, F.S. Or, if this document is being filed		
Si	gnatu	re of Registered Agent				