## L17000165216

(Reque	stor's Name)
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PICK-UP	WAIT MAIL
(Busine	ess Entity Name)
(Docum	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filin	g Officer:

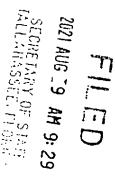
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## COVER LETTER

TO: Registration Section

THE ALL GOODNESS COMPANY, LE	.c
SUBJECT:	f Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
JOANNE G. DIAZ	
Name of Person	<del></del>
THE ALL GOODNESS COMPANY, LLC	
Firm/Company	<del></del>
3575 EL VERDADO CT	
Address	
NAPLES, FLORIDA 34109-1306	
City/State and Zip Code	
joannegdiaz@zoho.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, plea	ase call:
JOANNE G. DIAZ	305 588-7519 n ( )
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following am	ount:
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy
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.

			OMPANY, I	· <del>· · · ·</del>	<u></u>
(a)	address of limited liability compar	(b	)		
Principal office ( <u>Note: M</u>	address of limited liability compar <u>UST BE STREET 4DDRESS</u> )	ny:		Mailing address of limite (Note: MAY BE POS	ad liability company:
3575 EL VERDADO	CT		3575 EL V	/ERDADO CT	
NAPLES, FLORIDA	A 34109-1306		NAPLES,	FLORIDA 34109-130	)G
08-02-2017			L17000165:	216	
Date of filin	ng/registration in Florida	4.		Document number	
(a) JOANNE G. DIAZ					
	egistered Office shown on the reco	ords of the Plorida	Dept. of Stat	- c:	
Registered Office Addre	css (MUST BE FLORIDA STI	REET ADDRESS		-	2021 SEC
3555 HERON COVE					AUG CRET LANH
BONITA SPRINGS				_	UG IG NHASSE
		, I <sup>.</sup> I	<del></del>	-	
b)					OF S
Enter name of NEW Res	gistered Agent and/or NEW Regi	istered Office add	lress:	-	AM 9: 29
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				_	W.
NEW Registered Office	Address:		· <u>-</u> · ·	-	Ф
3575 EL VERDADO				-	w.
3575 EL VERDADO	CT			-	w
3575 EL VERDADO	СТ			- -	w.
NAPLES  to limited liability compa	any is not organized under the	. FL 34109-13	06 State of Flo	orida, it is hereby cor	offermed that after th
NAPLES  e limited liability compage or changes are made will be identical. Or, if were authorized by an a	any is not organized under the the Florida street address of in the case of a Florida limit affirmative vote of the members.	. FL 34109-13 he laws of the 6 of the registered ted liability corbers of the limi	of State of Flo Loffice and opany, it is	I the business office hereby confirmed the company or as other	ifirmed that after the of the registered
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Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00