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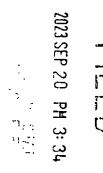
(Requestor's Name)
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PICK-UP WAIT MAIL
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COVER LETTER

TO: Registration Section Division of Corporations							
HOSTYMOSTY LLC SUBJECT:							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Chan	age and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter	to the following:						
Andrew Pierce							
Name of Person							
Cindy's Florida LLC							
Firm/Company	 _						
8051 N. Tamiami Trail STE E6							
Address							
Sarasota, Florida, 34243							
City/State and Zip Code							
reports@cloudpeaklaw.com							
E-mail address: (to be used for future annual repo	rt notification)						
For further information concerning this matter, please c	all:						
Andrew Pierce 77	27 300-0042						
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 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	me of the limited liability company: HOSTYMOSTY L	.LC			
(a)	8051 N. Tamiami Trail STE E6	_ (t	s) _		amiami Trail STE E6
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			1	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Sarasota, Florida, 34243		S	arasota. F	Florida, 34243
		_	_		
	08/04/2017		Li	17000166	768
	Date of filing/registration in Florida	4.			Document number
(2)	Registered Agents Inc.				
(a)	Registered Agent and Registered Office shown on the records of the	ne Florida	a De	pt. of Stat	– c:
	7901 4th Street N				
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES!	<u></u>		_
	Suite 300		_		20
	Ct. December .	22703			1023 SEP 20
	St. Petersburg, FL	33702	·		- <u>m</u>
(b)	Enter name of NEW Registered Agent and/or NEW Registered (NGC and add	1446		- <u>-</u> ITI
	Enter name of NEW Registered Agent and/or NEW Registered (Juice ad	iare	<u>ss</u> :	-i 🕏 🖵
	Cindy's Florida LLC				PH 3: 34
	NEW Registered Office Address:				- · -
	8051 N. Tamiami Trail STE E6				_
	Sarasota .FL	34243			
iange gent was/we e artic An Signat	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability. Pixxxx Pixxxx Pixxx are of a member or authorized representative of a member by accept the appointment as registered agent and agree	registered bility control the limited I	ed omp nited liab frew	office and pany, it is diability com Pierce, it	d the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany. Manager Printed or typed name of signee active. I further garee to comply with the
ovisie 2 ohli mere tifiea	ons of all statutes relative to the proper and complete prigations of my position as registered agent as provided by reflect a change in the registered office address. I he writing of this change.	erformi for in C ereby co	anc Cha Onfi	e of my o pter 605 rm that i	duties, and I am familiar with and acci, F.S. Or, if this document is being file the limited liability company has been

Signature of Registered Agent