## LITOURIT9050

(Requestor's Name)					
(Address)					
(Address)					
(City	//State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					

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S. WARREN NOV 0 3 2017

## **COVER LETTER**

TO: Registration Section Division of Corporations					
ARCLeaf LLC SUBJECT:					
Name 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:				
Sanjay Narayanan					
Name of Person	<del></del>				
ARCLeaf LLC					
Firm/Company	<del>-</del>				
9221 ESTERO RIVER CIR					
Address					
ESTERO, FL 33928-4418					
City/State and Zip Code					
info@arcleafllc.com					
E-mail address: (to be used for future a	nnual report notification)				
For further information concerning this matte	er, please call:				
Sanjay Narayanan	415 855-1639				
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 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:			
2. (a)	9221 Estero River Cir		9221 E	stero River Cir
(,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Estero, FL 33928	- ('		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  FL 33928
	22 Aug 2017	-	L170001	79050
3. 5. (a)	Date of filing/registration in Florida Meredith P. Narayanan	4.		Document number
	Registered Agent and Registered Office shown on the records of the 4245 Mariner Lane  Registered Office Address (MUST BE FLORIDA STREET AD)			
	Bonita Springs 3	4134		
(b)	Sanjay Narayanan			VOV 7
(1)	Enter name of NEW Registered Agent and/or NEW Registered O	ffice ad	dress:	FILED V-2 PM Longor Hissee, F
	9221 Estero River Cir			PH 2:
	NEW Registered Office Address;			20 20 20 20 20 20 20 20 20 20 20 20 20 2
	Estero 3	3928		_
the cha tgent was/we the arti	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of the organization or the operating agreement of the limited for the limited way.	ie regi: ility co the lim mited l	stered office ompany, it is sited liabilit	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
	yre of a member or authorized representative of a member			Printed or typed name of signee
provisi he obli o mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete perigations of my position as registered agent as provided for reflect a change in the registered office address. I here in writing of this change.	to act erform for in C reby co	in this cap ance of my Thapter 603 onfirm that	acity. I further agree to comply with the duies, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
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