# L17000186520

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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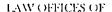


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#### COVER LETTER

	Registration Section Division of Corporations				
cun ie	LAHOYA, LLC				
SOBJEC	Name of Limited Liability Company				
Dear Sir	or Madam:				
The encl	losed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.			
Please re	eturn all correspondence concerning this matte	er to the following:			
	WALTER E. SMITH				
	Name of Person				
MERO	S, SMITH, LAZZARA, BRENNAN & B	RENNAN			
	Firm/Company				
	757 Arlington Avenue North		2010 DEC 13 A 1:30		
	Address		EC -		
	St. Petersburg, FL 33701		in w		
	City/State and Zip Code		A 1: 30		
	smith@mslbb-law.com		30		
E-1	mail address: (to be used for future annual rep	port notification)	·		
For further information concerning this matter, please call:					
	Walter E. Smith	727 822-4929			
	Name of Person	Area Code & Daytime Teleph	one 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:				
j	□ \$25 Filing Fee	<b>☑</b> \$55 Filing Fee & Certified Copy			

INHS18 (2/14)





### MEROS, SMITH, LAZZARA, BRENNAN & BRENNAN, P.A.

757 ARLINGTON AVENUE NORTH ST. PETERSBURG, FLORIDA 33701

PETER N. MEROS\*
WALTER E. SMITH\*\*/
BELINDA B. LAZZARA
KEVIN D. BRENNAN^
CHRISTIN C. BRENNAN
ALEXA V. SAAB

Mailing Address: Karen M. Clayton, Paralegal to Walter E. Smith

P. O. Box 27 St. Petersburg, FL 33731 Telephone (727) 822-4929 ext. 2 E-Mail: kelayton@mslbb-law.com Fax: (727) 821-7140

\*Board Certified Civil Trial Lawyer

† Board Certified Business Litigation Lawver

#Former Assistant State Attorney

/Florida Supreme Court Certified Mediator

^Board Certified Marital and Family Law Lawyer

December 6, 2018

#### CERTIFIED MAIL - RETURN RECEIPT REQUESTED

State of Florida
Division of Corporations
Registration Section, Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: LAHOYA, LLC

Document No.: L17000186520

Dear Sir/Madam:

The undersigned represents Lahoya, LLC with regards to the Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company concerning the above-captioned corporation. Enclosed please find the original and one (1) copy of the executed Statement of Change form, as well as our firms check in the amount of \$55.00 as fee for the enclosed. Kindly file the within form and return a "certified" copy to my attention in the self-addressed, stamped envelope provided.

Thank you for your time and attention to this matter. If you have any questions or concerns, please do not hesitate to contact our office.

Very truly yours,

WALTER E. SMITH

WES/kc Enclosures

cc: Philip Lazzara (w/encl)

## 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	name of the limited liability company:LAHOYA,	LLC	
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	August 31, 2017		L17000186520
3.	Date of filing/registration in Florida	4,	Document number
5. (a)	Meros, Smith, Lazzara, Brennan & B	Brennan	
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dep	t. of State:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
	757 Arlington Avenue North		¥ 2
	St. Petersburg, , FL	33701	WALLAND DEC
(b)	Walter E. Smith		
` '	Enter name of NEW Registered Agent and/or NEW Registered	Office address	> 1 30 > 1 30 —
	NEW Registered Office Address:		<del></del>
	757 Arlington Avenue North		<u> </u>
	St. Petersburg , FL	33701	
the cha agent v was/we the art Signa	imited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited likere authorized by an affirmative vote of the members of organization or the operating agreement of the number of a member of authorized representative of a member by accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered opent as provide left reflect a change in the registered office inderess. It is difficultured of this change in the registered of the proper and complete ligations of this change in the registered of the proper and complete ligations of this change in the registered of the proper and complete ligations of this change in the registered of the proper and complete ligations of this change in the registered of the proper and complete ligations of the proper and complete light l	the registere ability compact the limited liabi	ed office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company  ATIACA  Printed or typed name of signee  this canacity. I further agree to comply with the
notifie	d in weiting of this change		, , , , , , , , , , , , , , , , , , ,

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

Signature of Registered Agent