L17600/87475

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D. SCOTT FEB - 8 20:3

COVER LETTER

TO:	Registration Section Division of Corporations				
SHR.	VIPPAIN.COM, LLC				
.9013.	·	ne of Limite	d Liability Company		
Dear	Sir or Madam:				
The c	enclosed Registered Agent/Registered Off	ice Change	and fee(s) are submitted for f	filing.	
Pleas	e return all correspondence concerning th	is matter to	the following:		
LISA	ANDRA ESTEVĒZ, ESQ.				
	Name of Person				
DI P	IETRO PARTNERS				
	Firm/Company		· · · · · ·		
901	E. LAS OLAS BLVD., SUITE 202			2018 FEB	\neg
	Address			EB -1	FILE
FOF	RT LAUDERDALE, FL 33301			FEB -b A II: ILU ATTASSEE: FLORION	
	City/State and Zip Code			A III III	
SEF	RVICE@DDPALAW.COM				
	E-mail address: (to be used for future and	nual report r	notification)		
For fi	urther information concerning this matter.	please call	:		
LIŞA	NDRA ESTEVEZ	954 at (712-3070		
	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				
	☑ \$25 Filing Fee		1 \$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. N	Name of the limited liability company: VIPPAIN.COM	M, LLC			
2. (a)	1301 FAST BROWARD BLVD	(b	(b) 1301 EAST BROWARD BLVD.		
2. (d.	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*)	N	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	SUITE 220	_	SUITE 2	<u> </u>	
	FORT LAUDERDALE, FL 33301		FORT LAUDERDALE, FL 33301		
	09/01/2017	I	L1700018	7478	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	DAVID DI PIETRO & ASSOCIATES, P.A.				
J. (ti	Registered Agent and Registered Office shown on the records of t	the Florida	Dept. of State	:	
	101 NE 3RD AVE, SUITE 1410				
	Registered Office Address (MUST BE FLORIDA STREET A	1DDRESS	1		
	FORT LAUDERSALEFL	33301		2018	
(b	DI PIETRO PARTNERS			TALL AND	
X					
	901 E. LAS OLAS BLVD., SUITE 202			A III E	
	NEW Registered Office Address:			RIDA	
	FORTLAUDERDALE	00004			
	FORT LAUDERDALE FL.	33301 ———			
the chagent was/v	limited liability company is not organized under the law nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the regis ability co of the limi limited li	tered office mpany, it is ited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. STEVEZ	
_	ature at member or authorized representative of a member			Printed or typed name of signee	
provit the of to me notifi	why accept the appointment as registered agent and agreeins of all statutes relative to the proper and complete prigations of my position as registered agent as provided rely reflect in change in the reflistered office address. It is a first of this change.	ee to act performa d for in C hereby co	in this capa mce of my a hapter 605, infirm that t	icity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	