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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
	y/State/Zip/Phone #)	
(Cit	y/otate/2ip/i floric #/	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
·	·	
	cument Number)	
(DC	cument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filina Officer:	
	g	

Office Use Only



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09/17/18--01004--015 **25.00

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

1 107/10			
l. N	ame of the limited liability company: TREATLUV, Co	on LLC	·····
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited (Note: MAY BE POST	liability company:
	LONGWOOD, FL 32779	LAKEMAR	24, FL 32
,		.1700020	9345
3.	Date of filing/registration in Florida 4.	Document number	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta	ate:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	_	
	LONGWOOD, FL 32779	_	11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
	, FL	_	to the
(b)		_	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		्र
	2515 GARY CIRCLE NEW Registered Office Address:	_	w e
	OUNEDIN, FL 34698	_	
	, FL		
If the 1	limited liability company is not organized under the laws of the State of F	Jorida, it is horoby con	dirmed that after
the cha	ange or changes are made, the Florida street address of the registered offi	ce and the business off	ice of the registered
agent	will be identical. Or, in the case of a Florida limited liability company, it	is hereby confirmed th	nat the change(s)

was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Printed or typed name of signee Signature of a member or authorized representative of a member

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect in the limited liability company has been notified in writing of this change