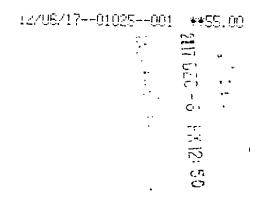
## L170000aa1018

(R <b>e</b> que	stor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	_ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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GEC ( 8 7M7)
J. HARRIE

## COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations				
SHRJI	SUBJECT: Modern Money Advisor LLC  Name of Limited Liability Company				
0020					
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Offic	e Change and	fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:					
Angel	la Moore				
	Name of Person		<del></del>		
Mode	rn Money Advisor LLC				
	Firm/Company		_		
871 P	Plover Ave				
	Address		<del></del>		
Miam	i Springs, FL 33166				
	City/State and Zip Code		_		
angel	amooremma@gmail.com				
Е	-mail address: (to be used for future annu	al report notif	ication)		
For fur	ther information concerning this matter, p	olease call:			
Angel	a Moore	404 at (	819-0884		
	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	Re Di P.C	gistration Section vision of Corporations D. Box 6327 Hahassee, Florida 32314		
	Enclosed is a check for the following amount:				
	□ \$25 Filing Fee	<b>☑</b> \$:	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.

l. Na	ame of the limited liability company: Modern Mone	y Advisor LLC
2. (a)	871 Plover Ave	(b) 871 Plover Ave
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	Miami Springs, FL 33166	Miami Springs, FL 33166
	Oct 25, 2017	L17000221018
3.	Date of filing/registration in Florida	4. Document number
5. (a)	Registered Agent and Registered Office shown on the records of the States Corp.  Registered Agent and Registered Office shown on the records of the States Agent and Registered Office Address  Registered Office Address  MUST BE FLORIDA STREET AGENT AGEN	K court A
(b)	Angela Moore	33166-US-33612 5
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 871 Plover Ave	Office address:
	NEW Registered Office Address:	<del></del>
	Miami Springs . FL	33166 US
the cha agent v was/we the arti	ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limit.	vs of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) if the limited liability company or as otherwise provided in limited liability company.  Angela Moore
I here provisi the obl to merc	ture of a member or authorized representative of a member by accept the appointment as registered agent and agrains of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I have been the change of this change.	Printed or typed name of signee ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept I for in Chapter 605, F.S. Or, if this document is being filed sereby confirm that the limited liability company has been