L17000 226 982

| (Re | equestor's Name) | | |
|---|--------------------|-----------------|--|
| (Ac | ddress) | | |
| (Address) | | | |
| (Ci | ty/State/Zip/Phone | = #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | ısiness Entity Nan | ne) | |
| (Document Number) | | | |
| Certified Copies | Certificates | of Status | |
| Special Instructions to Filing Officer: | | | |
| | | | |
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Office Use Only



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A SOLY

COVER LETTER

| TO: | Registration Section Division of Corporations | | |
|--------|--|--|---|
| SUBJ | ECT: | | |
| | Nam | e of Limited Li | ability Company |
| Dear S | Sir or Madam: | | |
| The er | nclosed Registered Agent/Registered Offi | ce Change and | fee(s) are submitted for filing. |
| Please | return all correspondence concerning thi | s matter to the | following: |
| Chris | ti M. Klingbiel | | |
| | Name of Person | | _ |
| Navig | gating Matters, LLC | | |
| | Firm/Company | | |
| 971 E | Egrets Run Apt 102 | | |
| | Address | ······································ | |
| Naple | es, FL 34108 | | |
| | City/State and Zip Code | <u>-</u> | |
| Chris | tiK@navigatingmatters.com | | |
| E | -mail address: (to be used for future annu | ual report notifi | cation) |
| For fu | ther information concerning this matter, | please call: | |
| Çhris | ti Klingbiel | 309 at (| 235-1442 |
| | 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 | Reg Div P.O | siLING ADDRESS: gistration Section ision of Corporations Box 6327 lahassec, Florida 32314 |
| | Enclosed is a check for the following | amount: | |
| | 2 \$25 Filing Fee | □ \$55 | 5 Filing Fee & Certified Copy |

INHS18 (2/14)

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

| Name of the limited liability company: | fatters, LLC |
|---|--|
| Christi Klinabiel | (b) Navigating Matters, LLC |
| Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| 971 Egrets Run Apt 102 | PO Box 110727 |
| Naples, FL 34108 | Naples, FL 34108 |
| 6/13/2019 | L17000226982 |
| Date of filing/registration in Florida | 4. Document number |
| UNITED STATES CORPORATION AGEN | ITS, INC. |
| (a) Registered Agent and Registered Office shown on the records of | |
| Registered Office Address MUST BE FLORIDA STREE 13302 WINDING OAK COURT A | T ADDRESS) |
| | 33612 ₹ ≈ |
| BRENNAN, MANNA & DIAMOND, P.L. | 2019 UCT TO THE TOTAL TO |
| (b) Enter name of NEW Registered Agent and/or NEW Register | ed Office address: |
| Scott Duval | |
| NEW Registered Office Address: | |
| 27200 Riverview Center Blvd., Ste. 310 | Dr. 19 |
| Bonita Springs | FL |
| the limited liability company is not organized under the change or changes are made, the Florida street address ent will be identical. Or, in the case of a Florida limited s/were authorized by an affirmative vote of the member articles of organization or the operating agreement of the infinite of a member or authorized representative of a member | laws of the State of Florida, it is hereby confirmed that after of the registered office and the business office of the register liability company, it is hereby confirmed that the change(s) is of the limited liability company or as otherwise provided in |

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

Signature of Registered Agent