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TO: Registration Section Division of Corporations

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SUBJECT: Forever Joy LLC

Name of Limited Liability Company

Dear Sir or Madam:

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The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Person

Forever Joy LLC

Firm/Company

7901 4th St. N #18140

Address

St. Petersburg, FL 33702

City/State and Zip Code

into@foreverjoy.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joy Williams

Name of Person

317-2236

at (³⁰⁵

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 amount:

💋 \$25 Filing Fee

□ \$55 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.

I. N	ame of the limited liability company:		
2. (a)	7901 4th St. N	1	b) 7901 4th St. N
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BQX)
	16140		18140
	St. Petersburg, FL 33702		St. Petersburg, FL 33702
	11/14/2017		L17000235856
	Date of filing/registration in Florida	4.	Docu ment inu mber
. (a)	Joy Williams		
	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of State:
	26125 SW 138th Ave		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u></u>
	309		
	Homestead , FI	33032	
(b)	Homestead, FI	33032	<u>د</u> م
(b)			
(b)	Registered Agents Inc		
(b)	Registered Agents Inc Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		
(b)	Registered Agents Inc Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 7901 4th St N		

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that 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.

1 Mulland	Joy Williams
Signature of a member or authorized representative of a member	Printed or typed name of signee
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 a change in the registered office address, I hereby confirm that the limited liability company has been matched in writing of this change. Generis aiid

- Assistant Secretary **David Roberts**

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Signature of Registered Agent

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