L18000000003

| (Re | questor's Name) | |
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| | d) | |
| (Ad | dress) | |
| (Ad | dress) | |
| · | • | |
| (Cit | y/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Name | e) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates o | of Status |
| Special Instructions to | Filing Officer: | |
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| | <u> </u> | |

Office Use Only



500308742135

02/09/18--01621--027 **25.00



J. HARRIS

COVER LETTER

| TO: | Registration Section Division of Corporations | | | | |
|----------|--|------------------|--------------------------------------|--|--|
| SUBJE | Green Vios LLC | | | | |
| 00202 | Name of Limited Liability Company | | | | |
| Dear Si | r or Madam: | | | | |
| The end | closed Registered Agent/Registered Off | ice Change and | fee(s) are submitted for filing. | | |
| Please 1 | return all correspondence concerning th | is matter to the | following: | | |
| Thai N | lguyen | | | | |
| | Name of Person | | | | |
| Green | Vios LLC | | | | |
| | Firm/Company | | ′ | | |
| 14632 | TULLAMORE LOOP | | | | |
| | Address | | _ | | |
| WINT | ER GARDEN, FL 34787 | | | | |
| | City/State and Zip Code | | | | |
| GREE | NVIOS2018@GMAIL.COM | | | | |
| E- | -mail address: (to be used for future ann | ual report noti | lication) | | |
| For furt | ther information concerning this matter, | please call: | | | |
| THAI | NGUYEN | 407 at (| 967-7556 | | |
| | Name of Person | <u> </u> | Area Code & Daytime Telephone Number | | |
| | STREET/COURIER ADDRESS: | М | AILING ADDRESS: | | |
| | Registration Section | | egistration Section | | |
| | | | vision of Corporations | | |
| | Clifton Building | | O. Box 6327 | | |
| | 2661 Executive Center Circle Tallahassee, Florida 32301 | Ta | Illahassee, Florida 32314 | | |
| | Enclosed is a check for the following amount: | | | | |
| | 2 \$25 Filing Fec | | 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

| N | ame of the limited liability company: | EN VIOS I | LLC | · · · · · · · · · · · · · · · · · · · | |
|-----|---|------------------|---------------------|---------------------------------------|--|
| (a) | (b) | | | | |
| | Principal office address of limited liability co | • | | _ | ress of limited liability company (AYBE POST OFFICE BOX) |
| | 14632 TULLAMORE LOOP | ~) | | 14632 TULLAM | |
| | WINTER GARDEN, FL 34787 | | - - | WINTER GARD | EN, FL 34787 |
| | 01/02/2018 | | | L18000000023 | |
| | Date of filing/registration in Florid | la | 4. | Documer | nt number |
| (a) | THAI NGUYEN | | | | |
| | Registered Agent and Registered Office shown on the | e records of the | e Florie | da Dent of State: | |
| | THAI NGUYEN Registered Office Address (MUST BE FLORID) | 4 STREET AL | DDRES | · | |
| | THAI NGUYEN | 4 STREET AL | DDRES | · | |
| | THAI NGUYEN Registered Office Address (MUST BE FLORID) | A STREET AL | DDRES | <u>SSS)</u> | |
| (b) | THAI NGUYEN Registered Office Address (MUST BE FLORID) 14632 TULLAMORE LOOP (A n) | A STREET AL | DDRES | <u>SSS)</u> | · · · · · · · · · · · · · · · · · · · |
| (b) | THAI NGUYEN Registered Office Address (MUST BE FLORID) 14632 TULLAMORE LOOP (A ni WINTER GARDEN | 1 630 1 | DDRES \ 84787 | 7 | 200 |
| (b) | THAI NGUYEN Registered Office Address (MUST BE FLORID) 14632 TULLAMORE LOOP (A n) WINTER GARDEN THAI NGUYEN | 1 630 1 | DDRES \ 84787 | 7 | |
| (b) | THAI NGUYEN Registered Office Address (MUST BE FLORID) 14632 TULLAMORE LOOP (A N) WINTER GARDEN THAI NGUYEN Enter name of NEW Registered Agent and/or NEW | 1 630 1 | DDRES \ 84787 | 7 | ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; |
| (b) | THAI NGUYEN Registered Office Address (MUST BE FLORID) 14632 TULLAMORE LOOP (A N) WINTER GARDEN THAI NGUYEN Enter name of NEW Registered Agent and/or NEW THAI NGUYEN | 1 630 1 | DDRES \ 84787 | 7 | |
| (b) | THAI NGUYEN Registered Office Address (MUST BE FLORID) 14632 TULLAMORE LOOP (A N) WINTER GARDEN THAI NGUYEN Enter name of NEW Registered Agent and/or NEW THAI NGUYEN NEW Registered Office Address: | 1 630 1 | DDRES \ 84787 | 7 | |

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.

| are arrived of organization of the operating agreement of the company. | | |
|--|---------------------------------|--|
| | THAI NGUYEN | |
| Signature of a member of authorized expresentative 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 notified in writing of this change.

Signature of Registered Agent