118000004627

	(Requestor's Name)	<u> </u>				
	(Address)					
	(Address)					
	(City/State/Zip/Phone #)					
PICK-U	P WAIT N	1AIL				
	(Business Entity Name)					
(Document Number)						
Lertified Copies	Certificates of Status					
Special Instructions to Filing Officer:						
certified Copies Certificates of Status						

Office Use Only

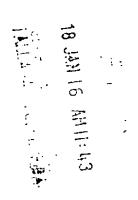


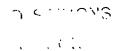
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RECEIVED

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COVER LETTER

_	sion of Corporations					
SUBJECT:	Design Vein LLC					
nonone i	Name	of Limited L	iability Company			
Dear Sir or !	Madam:					
The enclosed	d Registered Agent/Registered Office	: Change and	fee(s) are submitted for filing.			
Please return	i all correspondence concerning this	matter to the	following:			
Nicole Ena	a Guerrero					
	Name of Person		 -			
Design Ve	in					
	Firm/Company		_			
7862 NW	113th PL					
	Address		_			
Doral, FL	33178					
	City/State and Zip Code					
nicole@de	esignvein.com					
E-mail	address: (to be used for future annua	I report notif	ication)			
For further i	nformation concerning this matter, pl	ease call:				
Nicole Ena	a Guerrero	305 at (8015306			
	Name of Person	(Area Code & Daytime Telephone Numbe			
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations ton Building I Executive Center Circle ahassee, Florida 32301	Re Di P.(AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, Florida 32314			
Enc	osed is a check for the following amount:					
2 \$3	25 Filing Fee	□ Si	55 Filing Fee & Certified Copy			
¹ S18 (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.

Na	me of the limited liability company: Design Vein L	LC.	
	7862 NW 113th PL	(b)	
, /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Doral, FL 33178		
	01/05/2018	L180	000004627
	Date of filing/registration in Florida	4.	Document number
(a)	Nicole Guerrero		
()	Registered Agent and Registered Office shown on the records of 7862 NW 113th PL	the Florida Dept.	of State:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	8
	Doral	33178	5
b)	Nicole Ena Guerrero		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
	7862 NW 113th PL		
	NEW Registered Office Address:		
	Doral	33178	
cha int w s/we	mited liability company is not organized under the lay nge or changes are made, the Florida street address of zill be identical. Or, in the case of a Florida limited liar re authorized by an affirmative vote of the members of organization or the operating agreement of the	vs of the State the registered ability compar of the limited I limited liabili	of Florida, it is hereby confirmed that after deffice and the business office of the registere by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.
4	1 Wiff	Nicole E	na Guerrero
zerel visio obli nere	ure of affeither or authorized representative of a member by accept the appointment as registered agent and agrouns of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I find writing of this change.	performance i	of my duties, and I am familiar with and accor