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(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:	-		
RA Sign				
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SEGRETARY OF STATE

K. SALY MAR 13 2018

COVER LETTER

Division of Corporations	
3FI, LLC SUBJECT:	
	ne of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning th	nis matter to the following:
Michael G. Leff	
Name of Person	
Michael G. Leff, P.C.	
Firm/Company	
3789 Roswell Road	
Address	
Atlanta, GA 30342	
City/State and Zip Code	
mleff@sardleff.com	
E-mail address: (to be used for future and	nual report notification)
For further information concerning this matter	, please call:
Michael G. Leff	770- 644-0800
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	i ananassoo, i fonda 32314
Enclosed is a check for the following	g 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.

• • •		U	b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	936 CHAMBERS COURT, Suite A-11		PO BOX 545	
	BAGLE, CO 81631	_	EAGLE, CO	81631

	01/10/2018		L1800000913	5
3.	Date of filing/registration in Florida	4	Ľ	Document number
5. (a)	Registered Agent and Registered Office shown on the records of			
	Registered Agent and Registered Office shown on the records of NRAI SERVICES, INC.	the Florid	a Dept. of State:	70 8
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	27	200
	1200 SOUTH PINE ISLAND RD			高
	PLANTATION	33432		る。
	F1			기를 무 그
(b) .	Bnter name of NEW Registered Agent and/or NEW Registered			물의 후
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress	TARY OF STATE
	National Registered Agents, Inc.			
	NEW Registered Office Address:			•
	1200 South Pine Island Road		. <u></u>	
	Plantation	33324		
	. PI			

THE COURSE STREET COLORS OF CHILD



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 26, 2018

MICHAEL G. LEFF, P.C. MICHAEL G. LEFF 3789 ROSWELL RD. ATLANTA, GA 30342

SUBJECT: 3FI, LLC

Ref. Number: L18000009135

We have received your document for 3FI, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 618A00003911

