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LLC REGISTERED AGENT CHANGE INNOVATIVE ARKITEKTURE LLC

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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.

1.	N	ame of the limited liability company: INNOVATIVE	ARKIT	EKTURE	LLC
2.	(a)		(ኬ)		
	.,	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)	_ (9)	М	(ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		1551 N FLAGLER DR			
		WEST PALM BEACH, FL 33401	-		
		02/08/2018	Į	1800003	6150
3.		Date of filing/registration in Florida	4.	Ĭ	Document number
5.	(a)	LEGALING CORPORATE SERVICES INC.			
Ψ.	()	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State:	
		5237 SUMMERLIN COMMONS BLVD STE	400		
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		FORT MYERS , FL	33907		
	(b)	ROCKET LAWYER CORPORATE SERVICE	ES LLC	_	
``		Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		155 OFFICE PLAZA DRIVE, 1ST FLOOR		NICE NAME OF THE PERSON OF THE	
		NEW Registered Office Address:	,		
					
		TALLAHASSEE ,FL	32301		19
r£.					de a la la hacalana a servici del care A
the	cha	imited liability company is not organized under the law unge or changes are made, the Florida street address of	the regist	ered office	and the business office of the registered
age	ent v s/w	will be identical. Or, in the case of a Florida limited lia re/authorized by an affirmative vote of the members of	bility cor f the limi	npany, it is ted liability	hereby confirmed that the change(s)
the	ant	cies of organization or the operating agreement of the	limited li	bility com	pany.
	\mathcal{L}	Mu f Will	JESS		LL, AUTHORIZED REPRESENTATIVE
	/ -	Ture of a member of Authorized representative of a member			Printed or typed name of signee
pro the to t	ovisi obl mer	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had by writing of this change.	ee to act i performa I for in C vereby co	in this capa nce of my d hapter 603, nfirm that th	city. I further agree to comply with the utles, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been
Sig	natu	Y. Herrey Asst. Store to n			

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

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