L180000040830

(Requestor's Name)					
(Address)					
(Address)					
(Ci	ity/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					

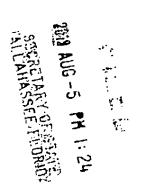
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COVER LETTER

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TO:	Registration Section				
	Division of Corporations			Egg Comment	
SUBJE	Epic Sexy You LLC			Alle State of the	
00201	Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Off	ice Change and fo	ee(s) are submitted for filing.	OBJECT TO SERVICE OF THE PROPERTY OF THE PROPE	
Please	return all correspondence concerning th	is matter to the fo	ollowing:		
Morga	an Field				
	Name of Person		_		
Epic 9	Sexy You LLC				
	Firm/Company		_		
3880	Bird Rd Apt 831				
	Address		_		
Miam	i FL 33146				
	City/State and Zip Code		-		
epics	exyyou@gmail.com				
Е	-mail address: (to be used for future ann	ual report notific	ation)		
For fur	ther information concerning this matter,	please call:			
Morga	an Field	708 at (370.0251		
	Name of Person	at (Area Code & Daytime Telepho	one Number	
	STREET/COURIER ADDRESS:	MA	ILING ADDRESS:		
	Registration Section	_	Registration Section		
	Division of Corporations		Division of Corporations		
	Clifton Building	P.O. Box 6327			
	2661 Executive Center Circle Tallahassee, Florida 32301	l alla	ahassee, 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.

1. Na	Epic Sexy Your ame of the limited liability company:	ou, LLC			
2. (a)	3880 Bird Rd Apt 831 Miami FL 33146	(b)	3880 Bird Rd Apt 831 Miami FL 33146		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
3.	02/14/2018 Date of filing/registration in Florida		3000040830 Document number		
5. (a)	Lynne Hampton				
J. (a)	Registered Agent and Registered Office shown on the records of FLORIDA BUSINESS MANAGEMENT CO	RP	t, of State:		
	Registered Office Address (MUST BE FLORIDA STREET 1128 ROYAL PALM BEACH BOULEVARD				
	ROYAL PALM BEACH, FI	33411 L			
• (b)	Morgan Field				
(-)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	55			
	3880 Bird Rd Apt 831				
	NEW Registered Office Address:		22		
	Miami, FI	33146 L	<u> </u>		
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the members.	f the registere iability compa of the limited	d office and the business office of the registered iny, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company.		
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee		
provisi the obl to mere notified	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act in the performance ed for in Chap hereby confir	his capacity. I further agree to comply with the of my duties, and I am familiar with and accept ster 605, F.S. Or, if this document is being filed m that the limited liability company has been		
Signatu	mentagen 4. field re of Registered Agent				
OFFIGUR	re or reference viscus				

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