118000041407

(Re	equestor's Name)					
(Ac	ddress)					
(Ac	ddress)					
(Ci	ity/State/Zip/Phone #)					
PICK-UP	☐ WAIT ☐ MAIL					
(Bo	usiness Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions to Filing Officer:						
	10/13/21					

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2021 OCT -5 AHII: 25 SECRETARY OF STATE

COVER LETTER

	egistration Section ivision of Corporations		,
SUBJECT	Essentially Joyful Living LLC		
		Name of Limited I	Liability Company
Dear Sir o	r Madam:		
The enclos	sed Registered Agent/Registered	Office Change and	I fee(s) are submitted for filing.
Please retu	irn all correspondence concerning	g this matter to the	following:
Dee Dee Si	tone		
	Name of Person		
Dee Dee St	tone, PLLC		
	Firm/Company		<u> </u>
PO Box 11	36		
	Address		
Antlers, Ol	< 74523		
	City/State and Zip Coo	le	
dstone@de	redeestone.com		
E-ma	ail address: (to be used for future	annual report noti	fication)
For furthe	r information concerning this ma	tter, please call:	
Dee Dee St	tone	469 at (583-0633
	Name of Person	<u> </u>	Area Code & Daytime Telephone Number
R D P.	lailing Address: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
E	nclosed is a check for the follow	ing amount:	
	\$25 Filing Fee	□ \$	555 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	me of the limited liability company: Essentially Joyfu	l Livin _i	g. L	LC				
7	(a)			(h)				
۷.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)	,	Mailing address of lim (Note: MAY BE Po			
		1924 SW 36th Avenue			1924 SW 36	6th Avenue			
		Delray Beach, FL 33445			Delray Beac	ch, FL 33445			
		February 14, 2018			L1800004140	07			
3.		Date of filing/registration in Florida	_ 4.	-	1	Document number	er .		
5.	()	Paracorp Incorporated							
٥.	(a)	Registered Agent and Registered Office shown on the records of	the Fio	rida	Dept. of State	- ::			
		Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS	<u> </u>	•			
		155 Office Plaza Drive, 1st FL					Ø	20	
		Tallahassee, FI	32301	l			ECRET	2021 O CT -5	
(1	(b)	Katrina Gray					ARY.		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office	ade	<u>lress</u> :		INVESTOR STATE	AH 11: 25	Passer.
		NEW Registered Office Address:				•	**;	ഗ	
		1924 SW 36th Avenue				-			
		Delray Beach, FI	33445	5		-			
cha age wa the	inge ent v s/we hph	imited liability company is not organized under the later changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liber authorized by an affirmative vote of the members of organization or the operating agreement of the florida limited liber.	e regist ability of the limite	tere cor lim d li	d office and mpany, it is ited liability	I the business offi hereby confirmed company or as o	ce of the d that the therwise	registe chang provic	ered ge(s)
III pro the to	nerel ovisi obl nere ligief	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a chappe in the registered office address, I fin writing of this change.	ree to (perfor ed for i hereby	act rma n C 2 co	in this capa nce of my d hapter 605, nfirm that th	ncity I further ag	ree to co	molv w	rith the l accept ng filed been
		Division of Corporations ● P.O.	Box 6.	327	• Tallahas	see, FL 32314			

FILING FEE: \$25.00