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(1	Requestor's Name)		
(,	Address)		
(,	Address)		
(1	City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer.			
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Ra Office Change

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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: FOCUS ON LLC Name of Limited Liability Compa	ny		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are sub-	mitted for filing.		
Please return all correspondence concerning this matter to the following:			
Barb Goldworm Name of Person			
FOCUS on , LLC Firm/Company			
2510 Fogarty Ave			
City/State and Zip Code) 		
Barbaoldwormagmail. COM E-mail address: (to be used for future aundal report notification)			
For further information concerning this matter, please call:			
Barb Goldworm at (303), 520-7580 Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADD Registration Section Division of Corporation P.O. Box 6327 Tallahassee, Florida 32301	ion orations		
Enclosed is a check for the following amount:			
\$25 Filing Fee \$355 Filing Fee &	Certified Copy		
INHS18 (2/14)			

STA^TTEMENT 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

Flor	rida.	
1.	Name of the limited liability company: Faus ow, LLC	
2. (Provides Principal office address of limited liability company: Previous Mailing	S Collins Ave #816 g address of limited liability company:
		e: MAY BE POST OFFICE BOX)
	Sunny Isles Beach, FL Sunn	y Isles Beach, FL
	33160	33160
		8000045399
3.		ument number
5.	(a) Bayb 60 000 FM Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	Note: Aldresses in
	16425 CollinsAve #816	2a \$2b are
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	also being
		changed to
	Sunny Isles Beach, FL 33160	the new
		address in
(Enter name of NEW Registered Agent and/or NEW Registered Office address:	Sb. (2510 Fogart
	A	The mailing
	2510 Fogarty Aue	add ress-grand
	NEW Registered Office Address:	principal often
		was isubwitte
	Key West .FL 33040	by smail.
the ager	ne limited liability company is not organized under the laws of the State of Florida, change or changes are made, the Florida street address of the registered office and nt will be identical. Or, in the case of a Florida limited liability company, it is here were authorized by an affirmative vote of the members of the limited liability con articles of organization or the operating agreement of the limited liability company	the business office of the registered by confirmed that the change(s) appany or as otherwise provided in
	B 19/1 300	h Goldwaren
Si	gnature of a member or authorized representative of a member Print	6 Goldworm ded or typed name of signee
prov the c	ereby accept the appointment as registered agent and agree to act in this capacity, visions of all statutes relative to the proper and complete performance of my dutie, obligations of my position as registered agent as provided for in Chapter 605, F.S. nerely reflect a change in the registered office address, I hereby confirm that the lifted in writing of this change.	I further agree to comply with the s, and I am familiar with and accept . Or, if this document is being filed mited liability company has been

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

Signature of Registered Agent