# <u>L1800052391</u>

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(Business Entity Name)								
(Document Number)								
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#### COVER LETTER

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TO: Registration Section Division of Corporations

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## SUBJECT: HAVE FUN LLC

Name of Limited Liability Company

Dear Sir or Madam:

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The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**RYAN STURGIS** 

Name of Person

HAVE FUN LLC

Firm/Company

**102 NE 1ST AVENUE** 

Address

### DELRAY BEACH, FL. 33444

City/State and Zip Code

RSTURGIS@DELIVERYDUDES.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RYAN STURGIS	561 at ( )	900-7060	्रुक्ते <b>अ</b>				
Name of Person		Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS:	MAIL	ING ADDRESS:					
Registration Section	Registr	ation Section					
Division of Corporations	Divisio						
Clifton Building	P.O. B	P.O. Box 6327					
2661 Executive Center Circle	Tallaha	assee, Florida 32314					
Tallahassee, Florida 32301							
Enclosed is a check for the following	Enclosed is a check for the following amount:						
□ \$25 Filing Fee	🖸 \$55 Fi	iling Fee & Certified Cop	уý				
INHS18 (2/14)							

2018 DEC 17

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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.

I. Na	une of the limited liability company:	С							
2. (a)	102 NE 1ST. AVENUE	(	(b) 102 NE 1ST. AVENUE						
(,	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )	_ `		Mailing address of limited (Note: MAY BE POST		• •	:		
	DELRAY BEACH, FL.		DELRA	Y BEACH, FL					
	33444	_	33444		-				
	02/27/2018		L180000	52391					
3.	Date of filing/registration in Florida	4.		Document number					
5. (a)	RICHARD VIENS								
5. (u)	Registered Agent and Registered Office shown on the records of th	e Florid	la Dept. of Stat	le:					
	102 NE 1ST AVENUE. DELRAY BEACH, FL	. 334	444						
	Registered Office Address (MUST BE FLORIDA STREET AI 102 NE 1ST. AVENUE.	DDRES	<u>S)</u>	~					
	DELRAY BEACH	33444		_		2018			
(b)	RYAN STURGIS Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>			-		DEC 17			
	SAME					PH 2	- 		
	<u>NEW</u> Registered Office Address:			_		ເ <u>ເ</u> ເ			
	SAME			_	ja∙ ja				
the cha agent w was/we	FL,	s of the he reg bility c The lir	istered offic ompany, it i nited liabilit	- orida, it is hereby con e and the business off s hereby confirmed th ty company or as othe:	ice of the	e regis ange()	tered		
	ure of a member or authorized representative of a member		<u> </u>	Printed or typed name of					
$\sim$	by accept the appointment as registered agent and agree ons of all statutes requive to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	e to ac erforn for in creb <u>y</u> c	t in this cap lance of my Chapter 60: onfirm that	acity. I further age duties, and I am famil 5, F.S. Or, if this doct the limited liability co	to comp liar with iment is ompany l	ly with and a being ias be	the ccept filed en		
$\subseteq$	Division of Corporations• P.O. Bo FILING FE			ssee, FL 32314					