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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: REGISTERED AGENTS INC. Account Name

Account Number : I20090000081 : (307)200-2803 Phone

: (855)330-1010 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE INFAMISS KOUTURE, 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.

2. (a)		_ (o)	ailing address of limite			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		M	ailing address of limite (Note: MAYBE POS			y:
	7901 4th St N STE 300	7901 4tl	4th St N STE 300				
	St. Petersburg FL 33702	-	St. Peters	sburg FL 33702			
	02/28/2018		L180000	53344			
3.	Date of filing/registration in Florida	4.		Document number			
č ()	UNITED STATES CORPORATION AGENTS	, INC					
5. (a)	Registered Agent and Registered Office shown on the records of the			:			
	13302 WINDING OAK COURT						
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>sy</u>				
	SUITE A				 <u>-</u>	201	
	TAMPA	3361	2			2019 APR 10	ָב <u>ַ</u>
(b)	Registered Agents Inc.				경화 목학	0	FILE
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ldr <u>ess</u> .		1, -1	=	
	7901 4th St N					AH II: I	Ċ
	NEW Registered Office Address:					2	
	STE 300						
	St. Petersburg	3370	2				
the cha agent v	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the	s of th the reg bility (f the li	e State of Flo istered office company, it is nited liability	and the business of hereby confirmed reompany or as otl	that the c	ne regi hange	isterea (s)
	······································		ey Park				
Siena	ture of a member or authorized representative of a member			Printed or typed name	of signce		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Bill Havre - Assistant Secretary

Signature of Registered Agent