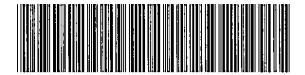
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Requestor's Name)					
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WAIT MAIL					
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(Document Number)					
Certificates of Status					
Special Instructions to Filing Officer:					

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COVER LETTER

Division of Corporations			
Harris and Darmanian, PLL SUBJECT:	.C		
Na Na	me of Limited	d Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Of	fice Change a	and fee(s) are submitted for filing.	
Please return all correspondence concerning the	his matter to t	the following:	
Marie Darmanian			
Name of Person	•		
Harris and Darmanian, PLLC			
Firm/Company			SECR
1875 N. Corporate Lakes Blvd, Suite 3	300		EASE ASE ASE
Address			15 P ANY OF ASSEE,
Weston, FI 33326			PH 6: 54 OF STATE E, FLORIDA
City/State and Zip Code			₹ 180 × 20
drmariedarm@aol.com			
E-mail address: (to be used for future an	nual report no	otification)	
For further information concerning this matter	r, please call:		
Marie Darmanian	954 at (609-3197	
Name of Person		Area Code & Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee. Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following	g amount:		
S25 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	ame of the limited liability company:	armania	n, PLLC	
2. (a)	1875 N Corporate Lakes Blvd Suite 300			
φ. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	("	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1875 N. Corporate Lakes Blvd Suite 300		1875 N.	Corporate Lakes Blvd, Suite 300
	Weston, FI 33326		Weston,	FI 33326
	11/01/2983		L1800008	31298
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Registered Agent and Registered Office shown on the records of Marie L. Darmanian	the Florida	Dept. of State	TALL SEC
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			全部 名 五
	17100 Royal Palm Blvd, Suite one			FILEED ET 15 PA ET ASSEE!
	Weston	33326		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Marie L. Darmanian	1 Office ado	lress:	STATE STATE
	NEW Registered Office Address:			
	1875 N Corporate Lakes Blvd Suite 300			
	Weston, FI	33326		
the cho agent v was/we	imited liability company is not organized under the lainge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members included organization or the operating agreement of the	f the regis lability co of the lim	tered office inpany, it is ited liability lability corr	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.
	Marie of a member or authorized representative of a member		MA	RIE L. ALMAWIAN Printed or typed name of signee
I here provisi the obl to mer notified	ture of a member of authorized representative of a member 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 elv reflect a change in the registered office address, I dinwriting of this change. Are	ree to act performe ed for in C hereby co		

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