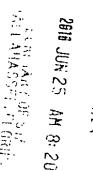
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## **COVER LETTER**

TO: Registration Section

INHS18 (2/14)

Division of Corporations		
SUBJECT: VIDGI FICOTING F	of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this	matter to the following:	
ISabela Teadoro Se	rra	
Vidu Flooring Plus Firm/Company	LL(_	
6730 121St Avenue un	nit 3	
Largo, FL 33773 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, p	elease call:	
ISANCIA SEVVA Name of Person	at (707 ) 458 - 0595 Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

## 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.	Name of the limited liability company: VICUI FLOOTING PIUS
2.	(a) Cleoni AP. VIdai Oliveira (b) Isabeia Teocloro Serra
	Principal office address of limited liability company: Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)  (Note: MAY BE POST OFFICE BOX)
	101 Dryan Mily Rd 0150 10151 AV VIII 5
	A14 369 Large, 1-6 33111 Large Fl, 33113
	05/24/2000
3.	Date of filing/registration in Florida  4. Document number
5	10 along TRADAND CANACI
э.	(a) SOVERIA TOCIOTO SETTO  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	6730 121st AV Unit 3 Largo FL 33773
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	6730 121" AVRNUL Unit 3
	Largo FL 33773
	Coio vida alimpira
	(b) COLO VICIO ON PIVO Enter name of NEW Registered Agent and/or NEW Registered Office address:
	6101 bryan Dairy Rd APT 309
	NEW Registered Office Address:
	6701 bryan Miry Rd AP+309
	Laigo FL33777
lf t	the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
ag	e change or changes are made, the Florida street address of the registered office and the business office of the registered ent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
	as/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in a carticles of organization or the operating agreement of the limited liability company.
_	Isabela Trodoro Serva
	Signature of a member or authorized representative of a member Printed or typed name of signee
pro the	hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept a chlingtions of my position as registered agent as provided for in Chapter 605, F.S., Or, if this decompant is being 61d.
10 10	ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept e obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been tified in writing of this change.
(/	2012 Vidal (Vlistila

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

Vido

Signature of Registered Agent