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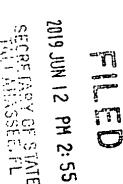
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RIBUH

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	Fortune Painters of Florida, ECT:	LLC				
	Name of Limited Liability Company					
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning th	nis matter to the following:				
Pete	Gonzalez	•				
	Name of Person					
Fortu	ne Painters of Florida, LLC					
	Firm/Company					
1034	5 Lake District Ln					
	Address					
Orlar	ndo, FL 32832					
	City/State and Zip Code					
info@	fortunepainters.com					
1	E-mail address: (to be used for future ann	nual report notification)				
For fu	rther information concerning this matter	, please call:				
Pete	Gonzalez	407 449-9145				
	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 ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
	Enclosed is a check for the following	g amount:				
	☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH F(LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compositions the following statement in order to change its registered office or registered agent, or both, in the State Florida.

•	10345 Lake District Ln, Orlando, FL 32832	a . 10:	345 Lake District Ln, Orlando, FL 328
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: M.AY BE POST OFFICE BOX)
	4/29/2019 4/14/2018		000094099
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	J.M Cohen Law, PA Registered Agent and Registered Office shown on the records of the Florida Dept. of State 615 E. Colonial Dr Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Suite 150E		of State:
	Orlando	32803	SECRET
(b)	Pete Gonzalez Enter name of NEW Registered Agent and/or NEW Registered Office address:		UN 12 PH
	10345 Lake District Ln		1 2: 55 E.F.L
	NEW Registered Office Address:		
	Orlando , FL	32832	
the ch agent was/w	limited liability company is not organized under the large 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 of cless of organization or the operating agreement of the	f the registered ability compar of the limited I	I office and the business office of the registe ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
	text land	Pete Go	onzalez
Signa	iture of a member or aythorized representative of a member		Printed or typed name of signee

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 accepted obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being fit 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?

Titi Morrilla -

Signature of Registered Ager

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