118000095494

(Requestor's Name)					
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
	siness Entity Nar	ne)			
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(Do	cument Number)				
Certified Copies	Certificates	s of Status			
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COVER LETTER

TO:	Registration Section Division of Corporations		•			
SUBJ	UBJECT: Name of Limited Liability Company					
	Nan	ne or ranno	ed Diabinty Company			
Dear !	Sir or Madam:					
The e	nclosed Registered Agent/Registered Off	ice Change	and fee(s) are submitted for filing.			
Please	e return all correspondence concerning th	is matter to	the following:			
Mosi	he Wahba					
	Name of Person	· · · · · · · · · · · · · · · · · · ·	·· <u>·</u>			
Early	Age Producers LLC		• ?			
	Firm/Company					
2210	Taylor Street 207		ਂ - - -			
	Address					
Holly	wood FL, 33020		().			
	City/State and Zip Code					
eapll	c2013@gmail.com					
	E-mail address: (to be used for future ann	ual report i	notification)			
For fu	orther information concerning this matter,	please call	:			
Mosh	ne Wahba	954 at (6816452			
	Name of Person	 \ <u></u>	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	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.	Na	me of the limited liability company: Home 5461 L	LC	
2.	(a)	Early Age Producers LLC	(h)	
	···,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		2210 Taylor Street 207		
		Hollywood FL, 33020		
		April 16, 2018	L180	000095494
3.		Date of filing/registration in Florida	4.	Document number
5	(a)	Early Age Producers LLC		· ~
٥.	(4)	Registered Agent and Registered Office shown on the records of t	of State.	
			3	
		Registered Office Address (MUST BE FLORIDA STREET A	<u> </u>	
		2210 Taylor St 207	1 1::	
		Hollywood	33020	
(b)				
	(b)	Albert Wahba		 -
	. ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		
		11000 1.00 100		
		- 100A WHHWH		
		NEW Registered Office Address:		
		5461 sw 55 ave		
		Davie .FI.	33314	
the age was the	cha ent w s/we arti-	imited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the unit of a member or authorized representative of a member	vs of the State the registered ability compar f the limited I	office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.
I h	erel	y accept the appointment as registered agent and agr	ee to act in th	is capacity. I further agree to comply with the
pro the to i	wisie obli nere	ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have the change of this change.	performance of for in Chapt defer for confirmation of the confirma	of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed a that the limited liability company has been
Sig	málug	w bl Registered Agent		