L18000134440

(Requestor's Name)					
(Address)					
(Address)					
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PICK-UP WAIT MAIL					
(Dusiness Entity Name)					
(Business Entity Name)					
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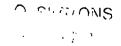
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COVER LETTER

TO:	O: Registration Section Division of Corporations					
SUBJ	Amanda C. Cummins, PLLC					
	Name of Limited Liability Company					
Dear S	ir or Madam:					
The er	closed Registered Agent/Registered Offic	re Change an	d fee(s) are submitted for filing.			
Please	return all correspondence concerning this	matter to the	e following:			
Amar	nda C. Cummins		,			
	Name of Person					
Amar	nda C. Cummins, PLLC					
	Firm/Company					
РО В	ox 10541					
	Address					
Saint	Petersburg, FL 33733					
	City/State and Zip Code	- - -				
aman	da@accumminslaw.com					
· ·	-mail address: (to be used for future annu	al report not	ification)			
For fu	ther information concerning this matter, p	lease call:				
Amar	da C. Cummins	727 at (401-1484			
	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	R D P.	IAILING ADDRESS: egistration Section fivision of Corporations O. Box 6327 allahassee, Florida 32314			
	Enclosed is a check for the following amount:					
	☑ \$25 Filing Fee	D 9	855 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. 8	lame of the limited liability company: Amanda C. C	Cummins, PLLC			
2. (a)	Amanda C. Cummins, PLLC	(b) Amand	(b) Amanda C. Cummins, PLLC		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\ \ \ \	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	1700 66th St N, Suite 206	PO Box	PO Box 10541 Saint Petersburg, FL 33733		
	Saint Petersburg, FL 33710	Saint P			
	05/30/2018	L18000134440			
3.	Date of filing/registration in Florida	4.	Document number		
5. (a	Amanda C. Cummins				
(Registered Agent and Registered Office shown on the records of Amanda C. Cummins, PLLC	te:			
	Registered Office Address	_			
	Beverly Hills Fig. 1	L.34464	SECR		
(b)	Amanda C. Cummins		聖言		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	SEE OF TO			
	Amanda C. Cummins, PLLC		FILED FILED SECRETARY OF STATE		
	NEW Registered Office Address:		- NDA 31		
	1700 66th St N, Suite 206		_		
	Saint Petersburg Fi	L.33710	_		
the chagent was/v the ar	limited liability company is not organized under the latange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited layere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the attree of a member or authorized representative of a member with accept the appointment as registered agent and agricons of all statutes relative to the proper and complete diligations of my position as registered agent as provide rely reflect a change in the registered office address, I are in writing of this change.	of the registered officiability company, it of the limited liability company of the limited liability company. Amanda C. (ce and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Cummins Printed or typed name of signee		
Signat	ure of Registered Agent				