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## COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	Ocean Shore Accounting LLC					
5,01,01		Name of Limited Liability Company				
Dear Si	r or Madam:					
The end	closed Registered Agent/Registered (	Office Change an	d fee(s) are submitted for filing.			
Please r	eturn all correspondence concerning	this matter to the	e following:			
Lisa La	mbrecht					
	Name of Person					
	F: 10					
4.4000	Firm/Company					
	Carolines Cove Apt 203A  Address					
Ormono	d Beach, FL 32174					
	City/State and Zip Code	e	<del></del>	20 Ji		
lisal@o	ceanshoreaccounting.com					
E-	mail address: (to be used for future a	annual report noti	fication)			
For furt	her information concerning this matt	er, please call:		<u>교</u> •5		
Lisa La	mbrecht	386 at (	492-6993	CS	•	
•	Name of Person		Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following	ing 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. N	lame of the limited liability company: Ocean Sh	ore Accounting LLC	
2. (a)	14000 Carolines Cove	14000 Carolines (	Cove
	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS) Apt 203A	y: Mailing ad	dress of limited liability company:  MAY BE POST OFFICE BOX)
	Ormond Beach, FL 32174	Ormond Beach, Fl	_ 32174
	June 22, 2018	L18000153519	
<ul><li>3.</li><li>5. (a</li></ul>	Date of filing/registration in Florida United States Corporation Agents, INC	4. Docume	ent number
<i>3.</i> (a.	Registered Agent and Registered Office shown on the reco	ords of the Florida Dept. of State:	
	Registered Office Address (MUST BE FLORIDA ST.) A	REET ADDRESS)	20
	Татра	, FL 33612	0
(b)	Lisa Lambrecht		in 3
(-,	Enter name of NEW Registered Agent and/or NEW Reg	istered Office address:	二 元 ・ ・
	Lisa M Lambrecht		# 05 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	NEW Registered Office Address:		$\dot{\alpha}$
	14000 Carolines Cove Apt 203A		
	Ormond Beach	FL_32174	
chang agent was/w the ar Sign I herr provis the of to me notifie	limited liability company is not organized under the or changes are made, the Florida street address will be identical. Or, in the case of a Florida limit were authorized by an affirmative vote of the memotion of organization or the operating agreement of a member or authorized representative of a member of a member and comparisons of all statutes relative to the proper and compositions of my position as registered agent as properly reflect a change in the registered office addressed in writing of this change.	of the registered office and the busted liability company, it is hereby bers of the limited liability company of the limited liability company.  L. Sa Lam  Printed of agree to act in this capacity. It	iness office of the registered confirmed that the change(s) my or as otherwise provided in  Office the registered country with the