## L18000165609

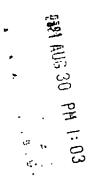
(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
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## COVER LETTER

	egistration Section division of Corporations			
SUBJEC	CLASSIC T FLOOR SYSTEM	LLC		
ounar.c.	Name of Limited Liability Company			
Dear Sir o	or Madam:			
The enclo	osed Registered Agent/Registered	Office Change and	I fee(s) are submitted for filing.	
Please ret	turn all correspondence concerning	g this matter to the	: following:	
Farid Abı	_			
	Name of Person		<del></del>	
CLASSIC	T FLOOR SYSTEM LLC			
	Firm/Company		<del></del>	
5968 NW	77th Terrace			
	Address			
Parkland,	FL 33067			
	City/State and Zip Co	de	<del></del>	
	g@classiettloor.com			
E-n	nail address: (to be used for future	annual report noti	ification)	
For furth	er information concerning this ma	itter, please call:		
Farid Ab	ugattas	954 8U	6677803 )	
	Name of Person		Area Code & Daytime Telephone Number	
] 	Mailing Address: Registration Section Division of Corporations 2.O. Box 6327 Fullahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
1	Enclosed is a check for the follow	ving amount:		
;	■ \$25 Filing Fee	Q	\$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. Ni	ime of the limited liability company: CLASSIC T FI	LOOR SYSTEM	I LLC		
2. (a)	5968 NW 77th Terrace.	(b) 59	(b) 5968 NW 77th Terrace.		
(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited habitity company (Note: MAY BE POST OFFICE BOX)		
	Parkland, FL 33067	Pa	irkland, FL 33067		
	07/09/2018		s000165609		
3.	Date of filing/registration in Florida	-i,	Document number		
5. (a)	Farid Abugattas				
(u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State.				
	Registered Office Address <u>(MUST RE FLORIDA STREE</u>	T_(DDRESS)	., rea		
	7318 TEXAS TRAIL		AUG		
	BOCA RATON	F1			
	Farid Abugattas		0		
(b)	Enter name of NEW Registered Agent and or NEW Register				
			: 03		
	NEW Registered Office Address.		<del></del>		
	5968 NW 77th Terrace				
	Parkland	FL_33067			
changagent was/w the art	limited liability company is not organized under the e or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the member of the members of the operating agreement of the members of the operating agreement of the operating agreement of the operations.	the registered of Hiability comp rs of the limited he limited liab	office and the business office of the registered any, it is hereby confirmed that the change(s) d liability company or as otherwise provided in		
Sign	ature of a member or authorized representative of a member		Printed or typed name of signic		
provis the ob to me	by accept the appointment as registered agent and estions of all statutes relative to the proper and completions of my position as registered agent as provicely reflect a change in the registered office address, and in writing of this quatre.	agree to act in de performanc ided for in Cha I hereby confi	this capacity. I further agree to comply with the e-of my duties, and I am familiar with and accep- pter 605, F.S. Or, if this document is being tiled rm that the limited liability company has been		
Signat	ure of Registered Agent				