L18000207969

(Requestor's Name)				
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COVER LETTER

TO:	Registration Section Division of Corporations				
CUDI	Micro Admin LLC				
SOBI	JECT:Nan	ne of Limited	Liability Company	<u>.</u>	
Dear :	Sir or Madam:				
The e	nclosed Registered Agent/Registered Off	ice Change ar	nd fee(s) are submitted for filing.		
	e return all correspondence concerning th				
ricase	e return an correspondence concerning in	is matter to u	ic following.		
Cynt	thia Wiegand				
	Name of Person				
Micro	o Admin LLC				
	Firm/Company				
3665	5 Fescue Lane			1	2
···	Address			29 55	3 9 16
Sara	asota FL 34232				EP 13
	City/State and Zip Code				3 24
Cind	ly1dnatesting@gmail.com			50 50 50	# 2:
_	E-mail address: (to be used for future ann	ual report no	tification)		بي ت
For fu	urther information concerning this matter.	please call:		, ,-	
Cynt	thia Wieghand Wiegand	941 at (926-0959		
	Name of Person	at (Area Code & Daytime Telephone	e 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 Fallahassec, Florida 32314		
	Enclosed is a check for the following	; amount:			
	■ \$25 Filing Fee		\$55 Filing Fee & Certified Copy		

INHS18 (2/14)

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:	min LLC
1. isa 2. (a)	3665 Fescue Laner Sarasota FL 34232	3665 Fescue Lane, Sarasota FL 34232
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	
	8/20/2018	L18000207969
3.	Date of filing/registration in Florida	4. Document number
5. (a)	Registered Agent and Registered Office shown on the record	ak Court
	Registered Office Address (MUST BE FLORIDA STR.	
	Cynthia Wiegand Enter name of NEW Registered Agent and/or NEW Registered Agent and New Registered Agent	<u> </u>
	NEW Registered Office Address: 3665 Fescue Lane	<u> </u>
	Sarasota	34232 , FL
the cha agent w was/we the arti Signat	ange or changes are made, the Florida street addre vill be identical. Or, in the case of a Florida limit ere authorized by an affirmative vote of the member cles of organization or the operating agreement of the distribution of a member that a fember or authorized representative of a member of	Cynthia Wiegand Printed or typed name of signee I further agree to comply with
попри	inguions of an statutes retained to the proper and complete in the registered agent as property reflect a change in the registered office address writing of this change. The writing of this change.	plete performance of my duties, and I am Jamiliar with and accounted for in Chapter 605, F.S. Or, if this document is being fixes, I hereby confirm that the limited liability company has been

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

INHS18 (2/14)