118000210937

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(Address)			
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COVER LETTER

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TO: Registration Section Division of Corporations

SUBJECT:		
Name	of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
, ,	S .	
Jenniter Phise		
Name of Person		
Firm/Company		
4723 W ATTANTIC AVE BI	ds A July AI	
Address		
	注 注	
Deiray Beach, Fl 3344	<u>5</u>	
City/State and Zip Code	mining the second secon	
E-mail address: (to be used for future annua		
E-mail address: (to be used for future annua	il report notification) 크음	
For further information concerning this matter, pl	lease call:	
Jenniter Phise	at (561) 865 - 6447	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following a	mount:	
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	
INHC10 (2/14)		

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.

2. (a)		(b)	
_ ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· ,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	6188 JUS F-9 #101		4773 W ATTENTIC NE MAS A SLITE M
	Byrten Beach, FC 33472		Deiray Beach, EL 33445
	9/4/18		118000210937
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Jenniter prochniewski		Filing cancelled
J. ()	Registered Agent and Registered Office shown on the records of th		due to returned check
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)	
	4723 W ATIGNTIC AVE BIRG A J.	ior A1	2010 OCT
	Description FL	33-145	
(b)	Jenniter Phige Enter name of NEW Registered Agent and/or NEW Registered C	Office address:	
	time hanc of the weekstered regent and of the weekstered C	onice address,) (1) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
	4773 W ASIGODY AND BIRS A (iite A7	~ ,
	Y723 W ATIANTIC AND BIRS A ST NEW Registered Office Address: (also PRINCIPLI addRES)	VII 11 11 11 11 11 11 11 11 11 11 11 11 1	
	Deifay Beach .FL	33445	
			
the cha agent v was/we	imited liability company is not organized under the laws inge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liable are authorized by an affirmative vote of the members of iteles of organization or the operating agreement of the liab	he registered of oility company, the limited liab	it is hereby confirmed that the change(s) oility company or as otherwise provided in
\bigcirc	~	Jenn	iter pruchniewiei
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obl to mer	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I ha d in writing of this change.	e to act in this (erformance of) for in Chapter erchy confirm to	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been
	re of Registered Agent		