## L18000215839

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**O**:

Registration Section

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Fursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company ubmits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

No	ume of the limited liability company: <u>Elegant We</u>	edding and Pourty Re	ntale	17
. (a)	1000	1018 Harmony L	,	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Clermont, FL 34711	Clermont, Fr	1347	<u>7</u> ]]
	Date of filing/registration in Florida 4.	L 18000 2 15 839  Document number		<b>-</b>
. (a)	Registered Agent and Registered Office shown on the records of the Florida	bept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	<del>-</del> 		
	H			
	10mpa , FL 33	lold_		
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office add	ress:	om ísiók 2023 SEP	<del>.</del>
	1018 Harmony Lane		<u> </u>	
	NEW Registered Office Address:		PH 12: 1	
	Clermony, FL 347	111	ō ÷	
hange gent w ras/wei ie artic	mited liability company is not organized under the laws of the Sor changes are made, the Florida street address of the registered vill be identical. Or, in the case of a Florida limited liability control authorized by an affirmative vote of the members of the limited so of organization or the operating agreement of the limited liability of a member or authorized representative of a member	I office and the business office of the reg npany, it is hereby confirmed that the cha ted liability company or as otherwise pro	gistered ange(s)	·
hereb rovisió se oblig merel otified	by accept the appointment as registered agent and agree to act is one of all statutes relative to the proper and complete performan gations of my position as registered agent as provided for in Cl. by reflect a change in the registered office address, I hereby continuous of this change.	n this capacity. I further agree to compl ice of my duties, and I am familiar with iapter 605, F.S. Or, if this document is l ifirm that the limited liability company h	ly with the and accept being filed as been	!

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

ignature of Registered Agent