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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Scent From Goo	LLC bility Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fe	e(s) are submitted for filing.
Please return all correspondence concerning this matter to the fo	llowing:
FISHLEY Malinowski. Name of Person	_
SCENT From God Govern)er)
3006 N Dover Rd Address	2018 CCT - 1
Dover FL 33527 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	i. Con
For further information concerning this matter, please call:	
A Shiey Malinowski at (860) Name of Person) 854-7476 Area Code & Daytime Telephone Number
Registration Section Registration of Corporations Division of Corporations Division Building P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 thassee, Florida 32314

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

Enclosed is a check for the following amount:

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	ame of the limited liability company: SC-en+ Fr	ממני	Gal	LLC
2. (3006 N Dover Rd (b) Principal office address of limited liability company:			DOVE - Rd Tiability company:
		Note: MUST BE STREET ADDRESS) DENCE FL 33527 1	(<u>Noje:</u> Dave r	MAY BE POST Fし	<u>0ffice box)</u> 33527
		Scoto 12 2 15	18000	 19111/	
3.		Date of filing/registration in Florida 4.	L OUCUG Docum	2 1 0 1 96 nent number	
5. (a)	United States Corporation of Registered Agent and Registered Office shown on the records of the Florida Dept.	Glents T	Īnc	Chevenne Mostey
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	r <u>t</u>		75 20
		<u></u>			OCT TO
		Tampa .FL 33616			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(1	n) _	Ashley Mainowski			
		Enter name of NEW Registered Agent and/or NEW Registered Office address:			: 33 3.75 1.75 1.75 1.75
		3006 N Dover Rd			, ·
		NEW Registered Office Address:			
		Dover FL 3356	27		
the dager	hai it w we	limited liability company is not organized under the laws of the State ange or changes are made, the Florida street address of the registered will be identical. Or, in the case of a Florida limited liability companiere authorized by an affirmative vote of the members of the limited liabilities of organization or the operating agreement of the limited liability.	l office and the ny, it is hereby liability compa	e business offi confirmed th	ce of the registered at the change(s)
<u> </u>) mat	holey Modinowski ASh ature of a member of authorized representative of a member	Printed	Maline or typed name of	SWSK,
I he prov the o	reb isio bli ere	the accept the appointment as registered agent and agree to act in the ions of all statutes relative to the proper and complete performance of ligations of my position as registered agent as provided for in Chapterly reflect a change in the registered office address, I hereby confirmed in writing of this change.	is capacity - I	further agree	to comply with the

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