L18000225311

(Re	equestor's Name)					
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PICK-UP	WAIT	MAIL				
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COVER LETTER

TO:	Registration Section Division of Corporations		·		
SUBJE	GOLDEN LION CAPITA		:		
SODSE	T:Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Regis	tered Office Change a	nd fee(s) are submitted for filing.		
Please	return all correspondence cond	erning this matter to the	ne following:		
Victoria	a Padron				
	Name of Per	Son			
ZenBus	siness Inc.				
_	Firm/Compa	ny			
336 E.	College Ave. Suite 301				
	Address		•		
Tallaha	ussee, FL 32301				
	City/State and Zi	p Code			
	nent@zenbusiness.com				
E	-mail address: (to be used for	future annual report no	tification)		
For fur	ther information concerning th	is matter, please call:			
Victori	a Padron	844 at (493-6249		
	Name of Person		Area Code & Daytime Telephone Number		
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the	following amount:			
	□ \$25 Filing Fee	۵	\$55 Filing Fee & Certified Copy		
INHS18	B (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)	1177 Hypoluxo Road Suite 102	(b)	(b) 1177 Hypoluxo Road Suite 102			
· (<u>-</u>)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailir	ng address of limited liability company: ne: MAY BE POST OFFICE BOX)		
	Lantana, FL 33462		Lantana, FL 33462			
	09/21/2018		L18000225311			
i. i. (a)	Date of filing/registration in Florida PHILLIPS, LYMAN	4.	Doc	ument number		
. (4)	Registered Agent and Registered Office shown on the records of 1177 Hypoluxo Road Suite 102	of the Florida	Dept. of State:			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	!	SEC TA		
	Lantana, 1	FL_33462		APR RETA LLAH		
(b)	ZenBusiness Inc.			RY ASS		
	Enter name of NEW Registered Agent and/or NEW Register	ed Office add	lress:	HASSEE.		
	336 E. College Ave. Suite 301			ASSEE, FL		
	NEW Registered Office Address:					
	Tallahassee	FL_32301				
hange igent v vas/we	imited liability company is not organized under the last or changes are made, the Florida street address of tivill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members cles of organization or the operating agreement of the last last last last last last last last	he registere liability con s of the limine limited li	d office and the npany, it is hen ted liability cor	business office of the registered eby confirmed that the change(s) mpany or as otherwise provided in		
Signat	ture of a mamber or authorized representative of a member		Prin	ited or typed name of signee		
provisi he obl o mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provid ty reflect a change in the registered office address, in writing of this change.	gree to act le performa led for in C I hereby co	in this capacity nce of my dutie hapter 605, F.S nfirm that the li	. I further agree to comply with the is, and I am familiar with and accep i. Or, if this document is being filed imited liability company has been		