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## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: E MUNOSO, UC  Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Elisha Munasa Name of Person				
E MUMACO, LC Dirm/Company				
17 Ponte Vedra Cir Address				
Borte Vedra Beach, 43 City/State and Zip Code	2082			
E-mail address: (tg) be used for future annu	ual report notification)			
For further information concerning this matter,	please call:			
EUSVa Mungo Name of Person	at (9b4 ) 294- US3  Area Code & Daytime Telephone 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 Tallahassee, 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. Name of the limited liability company: E Morago LLC				
2. (a)	(a) (b)			
(•-,	Principal office address of limited liability company: Mailing address	s of limited liability company:  */ BE POST OFFICE BOX*)		
	4745 Sutton Park Ct Ste 802 17 Ponte Vedr	a Civ		
	Jacksonville, FL US 32224 Ponte Vedra	Beach, 11. 32012		
	Sept 242018 LISCOCC225	973		
3.	Date of filing/registration in Florida 4. Document			
5. (a	(a) Marc Munaap			
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	registered Office Address (MOST BEST LORIDA STREET ADDRESS)			
	)- 1- 1/h- 2201			
	Jacksonville FL 32246			
(b	(b) Elisha Muraco			
•	Enter name of NEW Registered Agent and/or NEW Registered Office address:			
	17 Prote Verlice Circ			
	NEW Registered Office Address:			
	Ponte Vedra Beach, FL 320x2			
	, FL			
the cl agent was/v	the limited liability company is not organized under the laws of the State of Florida, it is he change or changes are made, the Florida street address of the registered office and the buent will be identical. Or, in the case of a Florida limited liability company, it is hereby conselver authorized by an affirmative vote of the members of the limited liability company or articles of organization or the operating agreement of the limited liability company.	siness office of the registered affirmed that the change(s) or as otherwise provided in		
1	Mac Mune T  Signature of a member or authorized representative of a member  Printed or ty	(CD		
·				
provi the or to me notifi	hereby accept the appointment as registered agent and agree to act in this capacity. I furt ovisions of all statutes relative to the proper and complete performance of my duties, and it obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, is merely reflect a change in the registered office address, I hereby confirm that the limited in writing of this change.	her agree to comply with the I am familiar with and accept I this document is being filed Tability company has been		
Signa	gnature of Registered Agent			

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