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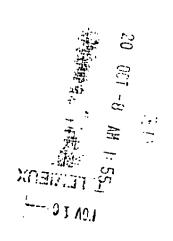
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5.

COVER LETTER

TO: Registration Section Division of Corporations	•
Sreal Clothing SUBJECT:	
	ne of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
John Srabian	
Name of Person	
Sreal Clothing	
Firm/Company	
497 nw 14th street	
Address	
Boca Raton, FL 33432	
City/State and Zip Code	
srealclothing@hotmail.com	
E-mail address: (to be used for future ann	nual report notification)
For further information concerning this matter,	please call:
John Srabian	at (561) 654-4811
Name of Person	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 Tallahassec, Florida 32314
Enclosed is a check for the following	amount:
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

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.

Na	Sreal Ck me of the limited liability company:	othing				
	497 nw 14th street Boca Raton, FL 3343	32	(t	497 nw	14th street Boc	a Raton, FL 33432
, ,	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ıy:	_ ((-	imited liability company: POST OFFICE BOX)
	10/09/2018	•	.	L180002	38881	
	Date of filing/registration in Florida		4.		Document numb	her
_ \	United States CORPORATION AGENT	S. INC			Dovanion name	501
a)	Registered Agent and Registered Office shown on the reco			Dept. of Star	- e:	
		51 414		or man	. .	
	Registered Office Address (MUST BE FLORIDA STR		npece		-	
	Registered Agents Inc. 7901 4th St N S			Ĺ		
					-	
	St. Petersburg	, FL 3	3702			
	Registered Agents Inc.			_	-	
) _				·	_	
	Enter name of NEW Registered Agent and/or NEW Regi	stered O	ffice ado	lress:		
	7901 4th St N					
	NEW Registered Office Address:				-	
	STE 300					
				-	-	20
	St. Petersburg	31	3702		٠	
		_, FL			-	- -
lir	mited liability company is not organized under the	na lauce	of the	State of Ele	ر پر دیگرسترها دارهای وارهای	on firm of this car
an	ige or changes are made, the Florida street addre	ess of th	e regis	tered office	and the business	Soffice of the regist
W	ill be identical. Or, in the case of a Florida limit re authorized by an affirmative vote of the memb	icd liabi	lity co	mpany it is	s hereby confirmê	ed that the change(s)
ننزا	les of organization or the operating agreement o	f the lin	nited li	ability com	rpany	omerwise provided : الرائد
			Joh	n Srabian	•	
atu	re of a member of authorized representative of a member	_			Printed or typed nar	me of signee
sio blig rel	v accept the appointment as registered agent and ns of all statutes relative to the proper and comp gations of my position as registered agent as pro y reflect a change in the registered office addre the writing of this change.	d agree plete pe vided fe ss, I her	to act rforma or in C eby co	in this cape nce of my c hapter 605 nfirm that t	icity. I further as luties, and I am f . F.S. Or, if this the limited liabili	gree to comply with amiliar with and ac document is being fi ty company has bee

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

Signature of Registered Agent