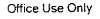
480009249841

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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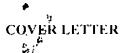
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SCORTIAN OF MANE
TALLAMASSEE, FLOR

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EEC.

S. YOUNG



TO: Registration Section Division of Corporations

SUBJECT:	Kim Steward Photography				
SOBJECT	Nan	ne of Limited I	iability Company		
Dear Sir or M	vladam:				
The enclosed	l Registered Agent/Registered Off	ice Change and	I fee(s) are submitted for filing	L.	
Please return	all correspondence concerning th	is matter to the	following:		
Michael St	teward				
	Name of Person				
	Firm/Company				
8 Pueblo	, ,			ರ∞ #	
	Address			ALL MOV	-17
Ormond B	each, Florida 32174			SS 4	FILED
	City/State and Zip Code			PM "41 37	0
•	stew@yahoo.com				
E-mail	address: (to be used for future and	nual report noti	fication)	7	
For further in	nformation concerning this matter	, please call:			
Kimberly S	Steward	386	, 473-2374		
	Name of Person		Area Code & Daytime Tele	phone Number	
Regi Divi Clift 2661	SEET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301	Ri D P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314		
Enc	losed is a check for the following	g amount:			
☑ \$:	25 Filing Fee	□ \$	55 Filing Fee & Certified Copy	y	
INHS18 (2/14	1)				

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.

l. Na	nne of the limited liability company: Kim Steward	Photography	
. (a)	8 Pueblo Trail		
(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Ormond Beach, Florida 32174		
	10/24/2018	L1800	00249841
) .	Date of filing/registration in Florida	4.	Document number
5. (a)	United States Corporation Agents, Inc		
	Registered Agent and Registered Office shown on the records of a	he Florida Dept. of	'State:
	13302 Winding Oak Court A		
	Registered Office Address (MUST BE FLORIDA STREET A		
	Tampa .FL	33612	FILED NOV 29 PM
(b)	Michael Steward		129 PM
(**)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	FLORIDA	
	NEW Registered Office Address:		
	8 Pueblo Trail		
	Ormond Beach ,FL	32174	
he cha gent w vas/we he arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of clessof organization or the appraising agreement of the law are of a member or authorized representative of a member	the registered o bility company, f the limited lial limited liability	ffice and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in
		so to not be the	• • •
rovisio he obli opnere wijiea	ny accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. In the provided of this change.	ee to act in this performance of for hi Chapter erefy confirm t	capacity. I juriner agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been

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