L18000 253332

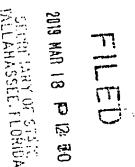
(Red	questor's Name)			
- (Ade	dress)			
(Add	dress)			
(City	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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MAR 27 2033 T. LEMIEUX

COVER LETTER

	egistration Section ivision of Corporations	•		
SUBJECT	She is Shemah, LLC			
troimit.e	Name of Limited Liability Company			
Dear Sir o	r Madam:			
The enclos	sed Registered Agent/Registered Offi	e Change and fee(s) are submitted t	or filing.	
Please rett	urn all correspondence concerning thi	matter to the following:		
Reesher	mah Smith			
-	Name of Person			
She is S	hemah			
	Firm/Company	<u> </u>		
5313 SV	V 22nd Street			
	Address			
West Pa	rk FL, 33023			
	City/State and Zip Code			
sheisshe	emah@yahoo.com			
E-ma	ail address: (to be used for future ann	al report notification)		
For further	r information concerning this matter.	lease call:		
Reesher	nah Smith	954 445-2078		
	Name of Person		me Telephone Number	
Re Di CI 26	rretr/courier address: egistration Section ivision of Corporations lifton Building 61 Executive Center Circle allahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 323		
Er	nclosed is a check for the following	mount:		
	\$25 Filing Fee	2 \$55 Filing Fee & Certif	ied 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. Na	ame of the limited liability company: She is Shema	ah		
2. (a)	5313 SW 22nd Street	(b) 53	(h) 5313 SW 22nd Street	
2 . (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)	
	West Park, FL 33023	We	st Park, FL 33023	
	November 1, 2018	 L18(000253332	
3.	Date of filing/registration in Florida	4.	Document number	
÷ (0)	Reeshemah Smith			
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:	
	5313 SW 22nd Street West Park, FL 33	023		
	Registered Office Address (MUST BE FLORIDA STREET)			
	5313 SW 22nd Street		2018	
	West Park FL	33023	2018 MAN 18 SILUBETIANT SILUBETIANT ALLLAHASSI	
(b)	Reeshemah Smith			
` '	Enter name of NEW Registered Agent and/or NEW Registered	Office address:		
	Reeshemah Smith		100 mm m	
	NEW Registered Office Address:			
	2 Oakwood Blvd #190			
	Hollywood , FL	33020		
the cha agent v was/we	imited liability company is not organized under the layinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registered ability compar of the limited I limited liabili	office and the business office of the registered by, it is hereby confirmed that the change(s) lability company or as otherwise provided in	
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It I in writing of his change.	ee to act in th performance d for in Chapt hereby confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605. F.S. Or, if this document is being filed a that the limited liability company has been	
Signatu	re of Registered Agent			

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