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Registration Section

SweetGirlHandbags, LLC BJECT:	
Name of Limite	d Liability Company
r Sir or Madam:	
enclosed Registered Agent/Registered Office Change	and fee(s) are submitted for filing.
ase return all correspondence concerning this matter to	the following:
orah G. Breckinridge	
Name of Person	
etGirlHandbags, LLC	
Firm/Company	
0 Caparosa Circle	
Address	
bourne, FL 32940	
City/State and Zip Code	
breck@yahoo.com	
E-mail address: (to be used for future annual report n	otification)
further information concerning this matter, please call:	
orah G. Breckinridge 757	438-1628
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, 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	1 \$55 Filing Fee & Certified Copy
S18 (2/14)	

'ATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

suant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company mits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

3930 Caparosa Circle, Melbourne, FL 32940	(b)	3930 Caparosa Circle, Melbourne, FL 32940
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
11/05/2018 Date of filing/registration in Florida		8000259798 Document number
REGISTERED AGENTS INC.		
Registered Agent and Registered Office shown on the records	of the Florida D	ept. of State:
7901 4th Street N. Suite 300		
Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)	*************************************
St. Petersburg	FL 33702	70
		7020 OCT
Deborah G. Breckinridge		
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office addr	ess:
3930 Caparosa Circle		MIII: 1,2
NEW Registered Office Address:		
		2
		
Melbourne	FL	
mited liability company is not organized under the or changes are made, the Florida street address of taill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of the control of the	he registered liability comes of the limite	office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in hility company.
ure of a member or authorized representative of a member by accept the appointment as registered agent and a cons of all statutes relative to the proper and completing at a second completing the second completing to the proper and completing the second control of the registered agent as providing the second control of the second	igree to act in the performan ded for in Cho I hereby conj	Printed or typed name of signee this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been

iature of Registered Agent