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COVER LETTER

TO:	Registration Section Division of Corporations	*		
	TWO VISUALS LLC			
SUBJ	BJECT: Name of Limited Liability Company			
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.		
Please	e return all correspondence concerning this n	matter to the following:		
Ama	ado E. Claro			
	Name of Person	_		
TWO	O VISUALS LLC			
	Firm/Company			
128	12 Salomon Cove Dr			
	Address			
Win	dermere FI 34786			
	City/State and Zip Code			
ama	adoclaro@gmail.com			
	E-mail address: (to be used for future annual	l report notification)		
For fu	orther information concerning this matter, ple	ease call:		
Ama	ado E. Claro	407 437.79.87		
	Name of Person	at () Area Code & Daytime Telephone Numbe		
	Name of reison	Area Code & Daytine Telephone Numbe		
	STREET/COURIER ADDRESS:	MAILING ADDRESS:		
	Registration Section	Registration Section		
	Division of Corporations	Division of Corporations		
	Clifton Building 2661 Executive Center Circle	P.O. Box 6327		
	Tallahassee, Florida 32301	Tallahassee, Florida 32314		
	Enclosed is a check for the following an	mount:		
	☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		
	20.201.41			

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.

12812 Salomon Cove Dr Windermere FI 34786			12812 Salomon Cove Dr Windermere Fl 3478
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
November 26, 2018	_	_ L	_18000272705
Date of filing/registration in Florida	4.		Document number
Registered Agent and Registered Office shown on the records of Amado E. Claro	the Florida	ı De	Dept. of State:
12812 Salomon Cove Dr	ADDRESS	<u>u</u>	
Windermere			
			(A)
		dre	mg > m
Jose M. Fraino			CORM S
NEW Registered Office Address:			<u> </u>
12812 Salomon Cove Dr			
Winderemere			
ige or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of less of dryanization or the operating agreement of the re of a number or authorized representative of a member	vs of the the regis ability co of the lim limited I	Steronite liab	tate of Florida, it is hereby confirmed that afte ered office and the business office of the regist ipany, it is hereby confirmed that the change(s' ed liability company or as otherwise provided bility company. Printed or typed name of signee or this capacity. I further agree to comply with
	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS) November 26, 2018 Date of filing/registration in Florida Registered Agent and Registered Office shown on the records of Amado E. Claro Registered Office Address (MUST BE FLORIDA STREET. 12812 Salomon Cove Dr Windermere FL Inter name of NEW Registered Agent and/or NEW Registered Jose M. Fraino NEW Registered Office Address: 12812 Salomon Cove Dr Winderemere FL Inted liability company is not organized under the law ge or changes are made, the Florida street address of libe identical. Or, in the case of a Florida limited lie authorized by an affirmative vote of the members of each of the appointment as registered agent and agent agent and agent and agent and agent ag	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS) November 26, 2018 Date of filing/registration in Florida 4. Registered Agent and Registered Office shown on the records of the Florida Amado E. Claro Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 12812 Salomon Cove Dr Windermere 34786 Inter name of NEW Registered Agent and/or NEW Registered Office address: 12812 Salomon Cove Dr Windermere 34786 Inter name of New Registered Agent and/or New Registered Office address: 12812 Salomon Cove Dr Windermere 34786 Inter diability company is not organized under the laws of the ge or changes are made, the Florida street address of the registered diability company is not organized under the laws of the ge or changes are made, the Florida street address of the registered diability company is not organized under the laws of the ge or changes are made, the Florida street address of the registered by an affirmative vote of the members of the limited liability company is not organized under the laws of the limited street address of the registered by an affirmative vote of the members of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the laws of the limited liability company is not organized under the	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) November 26, 2018 Date of filing/registration in Florida 4. Registered Agent and Registered Office shown on the records of the Florida I. Amado E. Claro Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 12812 Salomon Cove Dr Windermere 34786 Enter name of NEW Registered Agent and/or NEW Registered Office address 12812 Salomon Cove Dr Windermere 54786 Windermere 34786 Enter name of SEW Registered Agent and/or NEW Registered Office address 12812 Salomon Cove Dr Windermere 54786 Windermere 6580 FL mited liability company is not organized under the laws of the Sego or changes are made, the Florida street address of the registed by an affirmative vote of the members of the limit es of dentical. Or, in the case of a Florida limited liability comes and the segondary of the appearance of the segondary agreement of the limited liability con the appearance of a segurity of a member of the segondary of the appearance of a segurity of a member of the segondary of the appearance of a segurity of a member of the segondary of the appearance of a segurity of a member of the segondary of the appearance of a segurity of a member of the segondary of the appearance of a segurity of a member of the segondary of the appearance of a segurity of a member of the segondary of the appearance of a segurity of a member of the segondary of the segond

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(e)	12812 Salomon Cove Dr Windermere Fl 3478	6 1	2812 Salomon Cove Dr Windermere Fl 34786
	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)
	November 26, 2018		8000272705
	Date of filing/registration in Florida	4.	Document number
(a)			
()	Registered Agent and Registered Office shown on the records of Amado E. Claro	of the Florida Dep	t. of State:
	Registered Office Address (MUST BE FLORIDA STREET 12812 Salomon Cove Dr	TADDRESS)	
	Windermere F	34786	
b) .	Enter name of NEW Registered Agent and/or NEW Registered		\ \times \ \frac{1}{2} \ \tau \\ \tau \ \tau \\ \tau \ \tau \\ \tau \ \tau \\ \tau \ \tau \\ \tau \ \tau \\ \tau \ \tau \\ \tau \ \tau \ \tau \\ \tau \
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	ed Office address	AHASSIAR S
	Jose M. Fraino		
	NEW Registered Office Address:		
	12812 Salomon Cove Dr		P STATE OF STATE
	Winderemere, F	34786	
nar it w 'wei	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited lare authorized by an affirmative vote of the members desired organization or the operating agreement of the members.	of the registered liability compa- of the limited	d office and the business office of the registe my, it is hereby confirmed that the change(s) liability company or as otherwise provided in
znatu	ire of a neighbor or authorized representative of a member		Printed or typed name of signee
reb isio oblig	y accord the appointment as registered agent and agens of all statutes relative to the proper and complet gations of my position as registered agent as provid y reflect a change in the registered office address, I in writing of this change	gree to act in the e performance led for in Chap I berghy contin	lie a magin. I fough a grant a grant to the

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