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COVER LETTER

Division of Corporations	
SUBJECT: TRent Allen Furnishings LLC Name of Limited Liability Company	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Richard Yours	
Trent Allen Furnishings 11C Firm/Company	
2439 Nobel Ave Address	7.22
Ichigh Acres FL. 33973 City/State and Zip Code	21
Support OTrent Allen, US Email address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Arca Code & Daytime Telephone Number	
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303	
Enclosed is a check for the following amount:	

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

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. N	Name of the limited liability company: Trent Allen Furnishings LLC	
	Principal office address of limited Vability company: (b) Trent Allen 1	Eurnishing S ited liability company:
	12553 New Britainy blad Surk V18 12553 New Bill Fort Myers FL. 33907 Furt Myers FL.	Poury Hil Suite V -33907
3.	11/20/18 Ll8000273495 Date of filing/registration in Florida 4. Document number	<u> </u>
5. (a	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 2439 Nobel Auc	
	lehigh ACVES .FL 33973	~
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
		<u>.</u>
	NEW Registered Office Address: 12553 New Brittary blud Suite U-18	·
	Fort Myers .FL 33907	
chang agent was/w	limited liability company is not organized under the laws of the State of Florida, it is hereby of concerning the Florida street address of the registered office and the business office will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed were authorized by an affirmative vote of the members of the limited liability company or as of ticles of organization or the operating agreement of the limited liability company.	ce of the registered I that the change(s) therwise provided in
Sign	ature of a member of a member Printed or typed name	e of signee
provis the ob to mei	eby accept the appointment as registered agent and agree to act in this capacity. I further agresions of all statutes relative to the proper and complete performance of my district, and I am fail obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this derely reflect a change in the registered office address, I hereby confirm that the limited liability writing of this change.	ree to county with the
Signat	ture of Registered Agent	

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