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APR 12 2019 S. YOUNG

COVER LETTER

	Registration Section Division of Corporations	· ·
SUBJEC	CT: FRESH AIR CONSULTA Name of Limited I.	
Dear Sir	r or Madam:	
The enclo	closed Registered Agent/Registered Office Change and	fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to the	following:
	Oun CHIU. Name of Person	
Fres	Sh Air Consultant & Servi	CLS.
144	HZI VASHONS. INAY. Address	
<u>TUINT</u>	TER GARDEN / FL 3478 City/State and Zip Code	7_
Fresh E-m	hair Consultant (2) Smail . com mail address: (to be used for luture annual report noti	fication)
For furth	her information concerning this matter, please call:	
	SONA, BO at (40)	7) <u>V29 - 6609</u> Area Code & Daytime Telephone Number
F E C	Registration SectionRegistration SectionDivision of CorporationsDivision Of CorporationsClifton BuildingP.	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327

[8] \$55 Filing Fee & Certified Copy

INHS18 (2/14)

Tallahassee, Florida 32301

\$25 Filing Fee

Enclosed is a check for the following amount:

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	nne of the limited liability company: <u>FRESH</u> A	IR (CONSULTAN	IT & SER	VICES	LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing	ASHONS Waddress of limited lia		-
	WINTER GARDEN FL 34787		WINTER	BARDEN	FL	<u>34</u> 78
3.	11/28/2018 Date of filing/registration in Florida	- 4.	L180	00 273911		
J.		٦.	Docu	ment number		
5. (a)	Registered Agent and Registered Office shown on the records of the	Florida	Dont of States			
		. i iorida	Dept. of State.			
	Registered Office Address (MUST BE FLORIDA STREET AD	DRFSS				
	registered office reduces.	171(12(7))			19	
					型って	٦
	WINTER GARDEN, FL		超 3478	大源	20 ! [<u></u>
(b)	Steven Edward Bupple	(STEVEN	BAPPLE)		ニ の フ
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Of</u>	ffice add	ress:	LORIDA	84 :9	
	NEW Registered Office Address:					
						
	, FL					
the cha agent w	imited liability company is not organized under the laws inge or changes are made, the Florida street address of th vill be identical. Or, in the case of a Florida limited liabilities are authorized by an affirmative vote of the members of the	ie regisi ility coi	tered office and t inpany, it is herel	he business office by confirmed that	of the re	gistered (e(s)
	cles of organization or the operating agreement of the lin					
	July 1		JUN	CHIU		
-	ture of a member of authorized representative of a member			d or typed name of sig	,	
I heret provisi the obli to merc	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe igations of my position as registered agent as provided f ely reflect a change in the registered office address, I he	to act erforma or in C reby co	in this capacity, nce of my duties, hapter 605, F.S. nfirm that the lin	I further agree to and I am familia Or, if this docum ated liability com	comply we with and ent is being pany has	with the l accept ng filed bewn

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

Signature of Registered Agent