## L18000 277980

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(Address)				
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## COVER LETTER

TO:	Registration Section Division of Corporations	
SHRII	ECT: Westoe, C	1.4
3000	Nam	e of Limited Liability Company
Dear S	ir or Madam:	
The en	closed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.
Please	return all correspondence concerning thi	s matter to the following:
	John A. Darnel Name of Person	
	Westoe LLC Firm/Company	
	Firm/Company 5430	
16	5 430 5 430 East Ave Address	POB 4 975
•	Address	
(	De Lean Spas F-C City/State and Zip Code	32130
	dane 1 a deepastra-mail address: (to be used for future ann	ual report notification)
For fur	ther information concerning this matter,	please call:
	John Darhell Name of Person	at ( 443 ) 687-9441  Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
	Enclosed is a check for the following	amount:
	■ \$25 Filing Fee	□ \$55 Filing Fee & Certified 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: Westo	e ,	LLC	
	55914 Bay Rd		, POBOX 975	
(-)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (*)	Mailing address of limited liabilit (Note: MAY BE POST OFFI	
	Astor FL 32/02		Delea Spgs FL	
	113701 10 012		veces opport	
	12/63/2018		L18000277980	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Deep Astronomy LLC			
	Registered Agent and Registered Office shown on the records of th	e Florida (	Dept. of State:	
	55914 Bay Rd			
	Registered Office Address MUST BE FLORIDA STREET A	DDRESS)	<u> </u>	
		080	ALL SEC	
	Astor ,FL	3	TALLAHASSAY 18	
	N - (			
(b)	Deep Hstronomy, LLC			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	office addi		·
	5430 East Ave		DA SO	
	NEW Registered Office Address:			
	0.1			
	Veleon Jpgs, FL	371	30	
If the li	imited liability company is not accomized as due the large	£4b C	Contract Florida is in the character	Jala A
the cha	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the	he registi	stered office and the business office of	the registered
agent v	vill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of	oility con	impany, it is hereby confirmed that the	change(s)
the arti	cles of organization or the operating agreement of the li	imited lia	iability company.	
	the thous I well	_	J. Anthony Darnell Printed or typed name of signee	
Signat	ure of a member or authorized representative of a member		Printed or typed name of signee	2
f herel provisi	by accept the appointment as registered agent and agre- ons of all statutes relative to the proper and complete p	e to act i	in this capacity. I further agree to co.	mply with the
the obli	ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address, I he kin writing of the change	for in Cl	hapter 605, F.S. Or, if this document	is heing filed
notifice	hin writing of this change.	лену ст.	ты тасте итива иапшу compar	cy nas veen
Signatur	Mathon Janell			
~ 6y acul	A CO STANDARD STANDARD			