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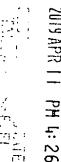
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	Ravish, LLC				
	Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Offi	ice Change and	fee(s) are submitted for filing.		
Please	return all correspondence concerning thi	s matter to the	following:		
Andre	ew S. Kline				
	Name of Person		_		
Ravis	sh, LLC				
	Firm/Company		<del></del>		
6278	C Durham Drive				
	Address		<del></del>		
Lake	Worth, FL 33467				
	City/State and Zip Code				
arylav	w@yahoo.com				
Е	-mail address: (to be used for future ann	ual report notif	fication)		
For fur	ther information concerning this matter,	please call:			
Arlen	e K. Kline	_561 at (	239-2961		
	Name of Person	_	Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.e	AHANG ADDRESS: egistration Section vision of Corporations O. Box 6327 dlahassee, Florida 32314		
	Enclosed is a check for the following	amount:			
	☑ \$25 Filing Fee	□ \$.	55 Filing Fee & Certified Copy		
18HS18	8 (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

2. (a)		(	b)				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		:	failing address of limited liability company (Note: MAY BE POST OFFICE BOX)			
	210 East Ocean Ave.		6278 C	Durham Drive	е		
	Lantana, FL 33462		Lake Wo	orth, FL 3346	7		
	12/18/2018		L1800028	89891			
	Date of filing/registration in Florida	4.		Document num	ber		
	Andrew S. Kline  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  512 Lucerne Avenue						
	512 Lucerne Avenue	ET ADDRES	<u>(S)</u>	-	ره در	2	
	<del></del>			- - -		2019 APR	
(b)	512 Lucerne Avenue	FL_33460	)	-	Single Si	2019 APR 11	
(b)	512 Lucerne Avenue  Lake Worth	FL_33460	)	-	Miller of the first		
(b)	512 Lucerne Avenue  Lake Worth  Enter name of NEW Registered Agent and/or NEW Registered	FL_33460	)	- - -	STATE OF STATE	2019 APR 11 PM 4: 26	
(b)	512 Lucerne Avenue  Lake Worth  Entername of NEW Registered Agent and/or NEW Registered Agent Andrew S. Kline	FL_33460	)	-	STORE STORE		# E

agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

ne differes of organization of the operating agreement of the	minted habinty company.
Delve V. Khi	Arlene K. Kline, MGR
Signature of a member or authorized representative of a member	Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

as Su Signature of Registered Agent