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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: 6D USA	of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Checy I D'Ale (a) Name of Person			
Firm/Company			
4700 G AJE M			
ST Pauslung I City/State and Zip/Code	1 3371.3		
E-mail address: (to be used for future annu	S. (and all report notification)		
For further information concerning this matter, p	dease call:		
Chery D'Alora Name of Person	at (<u>727</u>) <u>233–4853</u> 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 FO LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability compassibility the following statement in order to change its registered office or registered agent, or both, in the State Florida

Nan	ne of the limited liability company: (SA) (SA) 4700 9 AUE N ST PETECSBOLO F(b) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
•		-1900000 22556
	Date of filing/registration in Florida 4.	Document number
(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. 3111 30 At W Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 34205	19
(b) _	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	4700 9 AUEM NEW Registered Office Address:	
	54 Peluslung F1 33713	3
cha ent w s/we	imited liability company is not organized under the laws of the State age or changes are made, the Florida street address of the registered will be identical. Or, in the case of a Florida limited liability comparere authorized by an affirmative vote of the members of the limited cles of organization or the operating agreement of the limited liabil	iny, it is hereby confirmed that the change liability company or as otherwise provide

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.

Signature of Registered Agent