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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	Sue Mack Lawn and Landsca	ping, LLC				
	Name of Limited Liability Company					
Dear Si	r or Madam:					
The enc	losed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.				
Please r	return all correspondence concerning this n	natter to the following:				
Susan	Mack					
	Name of Person					
Sue M	lack Lawn and Landscaping, LLC					
	Firm/Company					
508 Je	ean Circle					
	Address					
Melbo	urne, FL 32904					
	City/State and Zip Code					
suema	acklawn@gmail.com					
E-	mail address: (to be used for future annual	report notification)				
For furt	her information concerning this matter, ple	ease call:				
Sue M		321-831-{ 8239				
	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	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)

To Whom ths May Cincern;

I had Legalzoom register my new business with the State of Florida and they put Legalzoom as my Registered agent, I wish to be my own Registered Agent, Enclosed please find a check to pay for the change, (Sandra is helping me set up my business),

Thank you in advance for your help

Susan Mack

508 Jean Circle

Melbourne FL 32904

321-831-8239

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:	Sue Mack Lav	wn and i	_andsca	ping, LLC
2. (a)	508 Jean Circle Melbourne FL		(b)	508 Jea	n Circle Melbourne FL 32904
2. (2)	Principal office address of limited li (Note: MUST BE STREET.		_ (0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1/20/2019		 -	LIC	1000025522
3.	Date of filing/registration in	-	4.		Document number
5. (a)	UNITED STATES CORPORATION				_
	Registered Agent and Registered Office sho	wn on the records of t	he Florida	Dept. of Stat	e:
	Design to Oct 1981	CLONID A CENTER			E 17 17 17 18 29
	Registered Office Address (MUST BE I 13302 WINDING OAK COURT	<u>FLORIDA STREET A</u>	<u>(DDRESS)</u>		
	Α	· · · · · · · · · · · · · · · · · · ·			
	TAMPA, FL 33612 US	, FL_			
	Sue Mack				(%)
(b)		/ NEWS 1			- 29
	Enter name of NEW Registered Agent and	or NEW Registered	Office add	ress:	<i>i</i> -
	508 Jean Cirle Melbourne, F	L 32904			
	NEW Registered Office Address:		_		-
					-
		, FL_			-
the cha agent v was/we	inge or changes are made, the Florida will be identical. Or, in the case of a cre authorized by an affirmative vote cles of organization or the operating	a street address of Florida limited lia of the members of agreement of the l	the regist bility cor f the limi limited lis	ered officenpany, it is ted liability consisted the second consisted in the second consisted in the second consisted in the second consisted consisted in the second consisted	orida, it is hereby confirmed that after c and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in npany.
	SI. 264 MCCI fure of a member or authorized representative	~		5	Printed or typed name of signee
Signa	fure of a member or authorized representative	of a member			Printed or typed name of signee
provisi the obl to mere notifica	ons of all statutes relative to the proj igations of my position as registered ely reflect a change in the registered Lin writing of this change.	red agent and agre per and complete p agent as provided office address, I h	ee to act i performa I for in Ci tereby coi	n this cap nce of my hapter 605 nfirm that	acity. I further agree to comply with the duties, and I am familiar with and accepts, F.S. Or, if this document is being filed the limited liability company has been
Signatur	Man Park	·			
orgnatu	re or registered Agent				

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