<u>k1900090880</u>

(F	Requestor's Name)
(/	Address)
(/	Address)
((City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(I	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
	Office Use Only



10/04/21--01020--025 ++25.00

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COVER LETTER

Registration Section TO: Division of Corporations

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SUBJECT: DIGITCI Kids Photos LLC Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Breyonna Bell

Firm/Company

1279 West Ave

Clermont FI 34711 City/State and Zip Code

<u>Geminibrel DQMGII Com</u> E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Breyonna Bell at (352) 702 - 6308 Name of Person Area Code & Daytime Telephone Number

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed is a check for the following amount:

🖄 \$25 Filing Fee

\$55 Filing Fee & Certified Copy

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.

I. Ni	une of the limited liability company: DIGITAL KICLS Photos LLC
2. (a)	1051S OLLIE COULT (b) 1051S OLLIE COURT Principal office address of limited liability company: Mailing address of limited hability company:
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>) (<u>Note: MUST BE STREET ADDRESS</u>) (<u>Note: MAY BE POST OFFICE BOX</u>)
	Clermont, FL 34711 LIN Clermont, FL 34711 UN
	041212019 LIGDOOO90880
3.	Date of tiling/registration in Florida 4. Document number
5. (a)	Lindsell H. Crown
	Registered Agent and Begistered Office shown on the records of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	10515 OLLIE COURT
	<u>Ciermont</u>
(b)	Breynna Bell:
()	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :
	<u>NEW</u> Registered Office Address:
	<u>ALM</u> Registered Office Address.
	CIERMONT FL 34711
change agent v was/we	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cles of organization or the operating agreement of the limited liability company.
Signa	ure of a member or gathorized representative of a member Printed for typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address. I hereby confirm that the limited liability company has been I'm writing of this change.

Signature of Registered Agent

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