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Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJI	PINK IVY HOME STAGING LLC						
	-	of Limited Liability Company					
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.					
Please	return all correspondence concerning this n	natter to the following:					
LOVE	ITE DOBSON						
	Name of Person						
INCFII	LE.COM LLC						
	Firm/Company						
17350	STATE HWY 249 STE 220						
	Address						
HOUS	TON, TX 77064						
	City/State and Zip Code						
EFILE	1234@INCFILE.COM						
E	-mail address: (to be used for future annual	report notification)					
For fur	rther information concerning this matter, ple	ease call:					
LOVE	ITE DOBSON	855 829-9090 at ()					
-	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 an	nount:					
	■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					

INH\$18 (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. N	ame of the limited liability company: PINK IVY HO	мЕ STAC	ING LLC				
2 (a)			(b)				
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address (Note: MAY)			
	3901 NW 79TH AVE SUITE 245 #482		3901 NW 79TH AVE SUITE 245 #482				
	MIAMI, FL 33166		MIAMI, FL 33166				
	05/09/2019		L19000126	6655			
3.	Date of filing/registration in Florida	— 4.		Document nu	ımber		-
~	Ţ Ţ						
5. (a)	Registered Agent and Registered Office shown on the records of	of the Flori	da Dent, of Sta	—			
	LEGALINC CORPORATE SERVICES INC.	·	ап Бери от оп				
	Registered Office Address (MUST BE FLORIDA STREE	TADDRE.	SS)	_			
	5237 SUMMERLIN COMMONS SUITE 400						
	FORT MYERS	FL33907		_	7117 7138	2020 MAR	
		<u> </u>		_		70	<u> </u>
(b)				_	-;	_	!
	Enter name of NEW Registered Agent and/or NEW Register	ed Office :	iddress:			P	[1]
	TONI GWINN-FISHER				:: 2: 2:	1 3: 20	
	NEW Registered Office Address:						
	4939 FLORAMAR TERRACE APT 412			_			
	NEW PORT RICHEY	34652					
change agent was/w the art Signa	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the form from Fisher. The first properties are registered as a member of a member.	ne registe liability of s of the li ne limited TO	red office a company, it mited liabili l liability co DNI GWINN	nd the business is hereby confitty company or mpany. FISHER Printed or type	s office of irmed that as otherw	the reg the ch vise pro	gistered ange(s) ovided in
provis the ob- to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, d in writing of this change.	gree to a fe perfori led for in I hereby	ct in this cap nance of my Chapter 60 confirm that	pacity. I furthe duties, and I a 5, F.S. Or, if t the limited lia	r agree to m familia his docun bility con	compler with nent is a pany h	ly with the and accept being filed as been
Signati	on townstoner ure of Registered Agent						