L19000183452

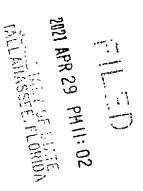
(Requestor's Name)					
(Ad	dress)				
(Address)					
(City/State/Zip/Phone #)					
_	_	_			
PICK-UP	WAIT	☐ MAIL			
(Bu	siness Entity Nan	ne)			
(Do	cument Number)				
Certified Copies	Certificates	s of Status			
Capaigl Instructions to					
Special Instructions to	Filing Officer:				

Office Use Only



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COVER LETTER

TO: Registration Section

Divi.	sion of Corporations				
CUDIECT.	Loa'a Ka Lani LLC Name of Limited Liability Company				
SUBJECT:					
Dear Sir or N	⁄adam:				
The enclosed	Registered Agent/Registered Office	: Change and	I fee(s) are submitted for filing.		
Please return	all correspondence concerning this	matter to the	following:		
Daniel Huste	od.				
			<u> </u>		
	Name of Person				
	Firm/Company	-	_		
1050 S E Mo	nterey Road, Ste. 400				
	Address		<u> </u>		
	Audress				
Stuart, FL 349	994				
	City/State and Zip Code	<u>-</u>			
dshusted@h	otmail.com				
E-mail	address: (to be used for future annua	l report notif	ication)		
For further in	formation concerning this matter, pl	ease call:			
Daniel Huste	d	772 at (233-9680		
	Name of Person		Area Code & Daytime Telephone Number		
Regi Divis P.O.	stration Section sion of Corporations Box 6327 shassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclo	osed is a check for the following an	nount:			
\$ 2	5 Filing Fee	□ \$5	55 Filing Fee & Certified Copy		
INHS18 (2/14)	i.				

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:	LC			
2. (a)	1050 S.E. Monterey Road, Ste. 400)50 S.E. Monterey Road	S.E. Monterey Road, Ste. 400		
2 . (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	Stuart, FL 34994	St	uart, FL 34994		
	07/15/2019	 L19	000183452		
3.	Date of filing/registration in Florida	4.	Document nur	nber	
5. (a)	Daniel Husted				
	Registered Agent and Registered Office shown on the records of 1345 SE St. Lucie Blvd	the Florida Dep	it, of State:		
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS)		2021 APR 29	
	Stuart , FL	34996		APR 29 P	
(b)	Daniel Husted			- 四°	
(1)	Enter name of NEW Registered Agent and/or NEW Registered	Office address	<u>s</u> :	PMII: 02	
	1050 S.E. Monterey Road, Ste. 400			02 (10)	
	NEW Registered Office Address:				
	Stuart . FL	34994			
chang agent was/w the art	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the gase of a Florida limited lia ere authorized by an affirmative vote of the members of ticles of organization of the aperating agreement of the	registered of	ffice and the business of the second of the	office of the registered med that the change(s)	
	ature of a member or anthorized representative of member		Printed or typed	_	
	thy accept the appointment astregistered agent and agri- tions of all statutes relative to the proper and complete ligations of my position as registered agent as provided tely reflect a change in the registered office address, I had in writing of this change.	ee to act in t performance d for in Chap hereby confir	his capacity. I further of my duties, and I an ster 605, F.S. Or, if th m that the limited liab	agree to comply with the n familiar with and accept is document is being filed vility company has been	
Signate	ure of Registered Agent				
	Division of Corporations• P.O. I FILING F	Box 6327• T EE: \$25.00	allahassee, FL 32314	ļ	