1200000 28809

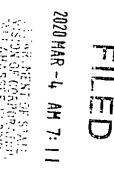
(Re	equestor's Name)			
(Address)				
(Address)				
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
				

Office Use Only



000341219540

03/04/20--01011--001 *+25.00



MAR 24 7020 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations	۰					
SUBJECT: adding baptism-name to name 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:						
debby van den boogaa Name of Person	<u>.rd</u>					
Wittenie IIC Firm/Company						
9938 montague.street						
tampa fl 33626 City/State and Zip Code						
debbyvabagaard @hotmail com E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Debby vd booggaard at Old	3) 4921718 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					

INHS18 (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. Na	me of the limited liability company: Witte	nie	110			
2. (a)	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)		
3. (a)	23 An Feb 93 2020 Date of filing/registration in Florida Debby Van den Boogaa Registered Agent and Registered Office shown on the records of the state of the		L 2000 Document num) 2080g		
(b)	Registered Office Address (MUST BE FLORIDA STREET A QQ38 MONTAGUEST (Pet +ampa +1 33626 AE Debby petronella van C Enter name of NEW Registered Agent and/or NEW Registered	den b	 oogaard	2020 HAR -4 AM 7: 11 ARIPEST OF STATE ASSOCIATION ASS	TILMO	
	NEW Registered Office Address:		 			
	, FI.					
Signa I here provisithe obtioner	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law accept the application of the registered agent and agree ions of all statutes relative to the proper and complete placetions of my position as registered agent as provided all vertical agent as provided all vertical agent and agree in the registered office address. I had in writing of this change.	registered o bility comp f the limited limited liabi	ffice and the business of any, it is hereby confirm I liability company or a lity company. Printed or typed of this capacity. I further	office of the registemed that the changs otherwise provide a mame of signed agree to comply we	ered e(s) led in Cara	
Signatu	Division of Corporations • P.O. E	Box 6327◆ T	Γallahassee. FL 32314			

FILING FEE: \$25.00