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## **COVER LETTER**

Division of Corporations		
SUBJECT: Millennium Girls 1-1-C Name of Limited Lie	ability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and f	ec(s) are submitted for filing.	
Please return all correspondence concerning this matter to the fe	ollowing:	
Tyanah Lewis Name of Person		
Millennium Girls LLC Firm/Company	_	
P. O BOX 670712  Address		
Corcal Springs F1, 33067 City/State and Zip Code	_	
typical ewis@gnail. (On E-mail address: (to be used for future annual report notific	cation)	
For further information concerning this matter, please call:		
Tycnah Lewis at (964) Name of Person	) 822 - 3417 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:		
\$\frac{1}{20}\$25 Filing Fee □ \$5.	5 Filing Fee & Certified Copy	

TO: Registration Section

## 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.

	ame of the limited liability company: HIRONIUM GIGIS LLC  8000 W Browned Blud PhotoLion (b) P.O. Dox # G70712 Coxal Sp  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  (Note: MAY BE POST OFFICE BOX)
3. 5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
(b)	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  5220 NW 554h BIVD APT 204  Cocon is Creen 33073 FL 33073  Finter name of NEW Registered Agent and/or NEW Registered Office address:
	NEW Registered Office Address:  3577 Wiles Bd AP+ # 203
chang agent was/w the art	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the e or changes are made, the Florida street address of the registered office and the business office of the registered will 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 icles of organization or the operating agreement of the limited liability company.  The confirmed that after the registered of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.  The confirmed that after the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.  The confirmed that after the confirmed that after the registered office and the business office of the registered office and the business off

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statules relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent