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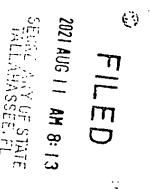
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John Call

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Nalu Uhane	
Name of Limited	Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change a	nd fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	ne following:
Meredith Moreno	
Nalu Uhane	
Firm/Company	
408 Grande Vista B	lud
Address	
Brodenton 74 342 City/State and Zip Code	<del>1</del> 12
•	. 1 000
Meredith. moreno @ ICI E-mail address: (to be used for future annual report no	ova . Wry otification)
For further information concerning this matter, please call:	
100	1 2742000
Name of Person at (45	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.

1. Na	ame of the limited liability company:	Uhane		
2. (a)	408 Grande Vista Blvd	(b) 408 G	rande Visi	ta Blug
	Principal office address of limited liability company:	-	lress of limited liability of	
	(Note: MUST BE STREET ADDRESS)	Λ	MY BE POST OFFICE On . みしるり	
	Bradenton 7L 34212	Bradent	on, 703	72-12-
		<del></del>	<del> </del>	
	8/25/20	L20000c	263560	
3.	Date of filing/registration in Florida 4.	Documer	nt number	
5. (a)	Cheyenne Moseley, VS	Corp Agents. I	<b>~</b> .	
` '	Registered Agent and Registered Office shown on the records of the Flo	orida Dept. of State:		
	5575 S. Semoran Blva	1		63
	Registered Office Address (MUST BE FLORIDA STREET ADDR	(ESS)	2021 SSS	€9
	34		2021 AUG Segnal /	77
	Orlando FL 3	32822	G I I	
(b)	Meredith Moveno		AM 8	MD
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office</u>	<u>e address</u> :	8: 13 STATE	
	408 Grande Vista Blud		بد ۱۰۱	·: .
	NEW Registered Office Address:			
	Bradentin, 76 342	12		
	ŕ			
	, FL			
change agent w was/we	imited liability company is not organized under the laws of or changes are made, the Florida street address of the regis will be identical. Or, in the case of a Florida limited liability are authorized by an affirmative vote of the members of the cles of organization or the operating agreement of the limited	stered office and the busi v company, it is hereby c limited liability compan ed liability company.	ness office of the reg confirmed that the ch	gistered ange(s)
	I hereby	mendth	Moreno	
Signat	ture of a member or authorized representative of a member	Printed or	typed name of signee	

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 statutes 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