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COVER LETTER

TO:	Registration Section Division of Corporations	•	·
SUBJ	ECT: Luxury	Meets Name of Limited	Order, LLC Liability Company
	Sir or Madam:		
The en	nclosed Registered Agent/Registe	red Office Change ar	nd fee(s) are submitted for filing.
Please	return all correspondence concer	rning this matter to th	e following:
	Krista Gas		
	Luxury Mee Firm/Company		
	9858 Clint	Moore 9	20ad, Ste C111-163
	Address		
	Boca Roctor City/State and Zip	Code Code	3496 (new i)
	Krista o 10 -mail address: (to be used for fur	LX UV LI ME ture annual report not	ification) Order com
For fu	rther information concerning this	matter, please call:	
	Klista Gank	val 21 (56	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 fol	flowing 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	ume of the limited liability company: Luxury Meets Order LLC
	9858 Clint Moore Rd (b)
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Suite CIII-163
	Boca Raton, 7C 33496
	8-26-2020 L20000266252
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Krista Gambal
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	9858 Clint Moore Road
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	- 6/11-116 A incorrect succe number
	Boca Raton El 33496
(b)	Rrista Gambal
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	9858 Clin+ Moore Road NEW Registered Office Address:
	NEW Registered Office Address:
	STE C111-163
	Boca Raton FL 33496
change agent v was/we the arti	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the 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 cles of organization or the operating agreement of the limited liability company. **Lista Camba** Krista Camba** Printed or typed name of signee
Signa	ure of a member or authorized representative of a member Printed or typed name of signee
provisi he obl o merc	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the cons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed lifty reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent