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COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations		
SUBJECT: AShley Ka	er Kolle Jion's ame of Limited Liability Company	
Dear Sir or Madam:)Z4 J
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.	AHASS
Please return all correspondence concerning t	this matter to the following:	
Ashley Fulche Name of Person	N	변화
Ashky Kei Ko	ollections	
1683 N houncac	L Rd Sinde 103 #arl	
City/State and Zip Code	34715	
E-mail address: (to be used for future as	CUNOC. Communication)	
For further information concerning this matter	er, please call:	
Ashley Fulcher Name of Person	at (407) 4040111 Area Code & Daytime Teleph	one 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, Su Tallahassee, FL 32303	ite 810
Enclosed is a check for the following	ng amount:	
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

SYATEMENT 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: Ashley kei Kollections
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10/5/2000 20000314371
3.	Date of filing/registration in Florida 4. Document number
5. (a	
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address <u>(MUST BE FLORIDA STREET ADDRESS)</u>
	131 Washington St #1006
	minneola, F. 34755
(b)	131 W washington Sh #1006 minneola , Fl. 34755 Ashley Fulcher
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	NEW Registered Office Address:
	1683 N nancock rd Sule 103 #216
	minnecle FL 34715
chang agent was/v the ar	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the cor 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) were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in ticles of organization or the operating agreement of the limited liability company. A harmonic of the limited liability company. Printed or typed name of signee
I hero provis the ob to me	eby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed rely reflect a change in the registered office address, I hereby confirm that the limited liability company has been the difference of this change.

Signature of Registered Agont