## LZO 000 385 149

(Re	questor's Name)	
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/ <u>(^i+</u>	y/State/Zip/Phone	o #1
(Cit	y/State/Zip/Filoni	<del>e #)</del>
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Eiling Officer	
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Office Use Only



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C KIURER Mr <sub>5 ()</sub> MrJ

## **COVER LETTER**

TO:		stration Section sion of Corporations		
SUBJ	ECT:	SMYLE Consulting, LLC		
			ame of Limite	ed Liability Company
Dear S	Sir or N	Madam:		
The er	relosed	I Registered Agent/Registered C	Office Change a	and fee(s) are submitted for filing.
Please	return	all correspondence concerning	this matter to t	the following:
Cathry	n Dee	Lakos		
	<del></del>	Name of Person		<del></del> _
SMYL	E Con	sulting, LŁ.C		
-	<del>-</del> -	Firm/Company		<del></del>
5307 8	8th Str	eet East		
		Address		
Brader	nton, Fl	orida 34211		
		City/State and Zip Code	;	<del></del>
lakosca	athy@g	gmail.com		
	E-mail	address: (to be used for future a	nnual report n	notification)
For fu	rther i	nformation concerning this matt	er, please call:	t:
Cathry	n Dee	Lakos	908 at (	624-0962
		Name of Person	"\	Area Code & Daytime Telephone Number
	Reg Div P.O	iling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enc	losed is a check for the followi	ng 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:				
2. (a)	SMYLE Consulting, LLC	a	b)		
(u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	_
	5307 88th Street East				
	Bradenton, Florida 34211	<del>_</del>			
	16Dec2020		3285929		
3.	Date of filing/registration in Florida	4.		Document number	_
5. (a)	Biz Filings				
(b)	Registered Agent and Registered Office shown on the records of the Stand Registered Office Address (MUST BE FLORIDA STREET)    200 5, Pine IS and Registered Agent   Florida Street	100V ADDRESS 233	ated si 324	2021 JUL -2 AHTI: 16	
	Bradenton	34211			
change agent v was/we the arti	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 liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law accept the appointment as registered agent and agreement of all statutes relative to the proper and complete ity reflect a change in the registered office address, I have of Registered Agent	register ability co of the lin limited  Cat	ed office a company, it inited liability co hryn Dec La	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.  Rkos  Printed or typed name of signce	