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C Kiuzek

COVER LETTER

	ation Section n of Corporations		
SUBJECT: B	linds and Shade Design LLC Name	e of Limited Lis	ability Company
Dear Sir or Mad	iam:		
The enclosed R	egistered Agent/Registered Offic	ce Change and t	ec(s) are submitted for filing.
Please return al	I correspondence concerning this	matter to the fo	ollowing:
Wendy Baker	Name of Person		_
Blinds and Shad	e Design LLC Firm/Company		
221 Hillcrest Dri	veAddress		_
Oviedo, FL 3276	City/State and Zip Code		
E-mail ad	dsandshades.com dress: (to be used for future annu rmation concerning this matter, p		ation)
Wendy Baker	Name of Person	at (407) 800-7962 Area Code & Daytime Telephone Number
Registr Divisio P.O. Bo	g Address: ration Section on of Corporations ox 6327 assec, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303
Enclose	ed is a check for the following a	imount:	
\/	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.

١.	Na	ame of the limited liability company: Blinds and Shades	s Design LLC	
2	(a)	221 Hillcrest Drive	(b) same	
	(7	Principal office address of limited liability company.		Mailing address of limited liability company.
		(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)
		Oviedo FL 32765		
		02/15/2001	1.2100007	/S(N)1
3.		Date of filing/registration in Florida	4.	Document number
_				
5.	(a)	Lorena Baker Registered Agent and Registered Office shown on the records of t	d Den Alland Co.	-
		Registered Agent and Registered Office shown on the records of C	ие гиста гусрс ог эт	atc
		Lorena Baker		
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
		3873 Queen Sago Ct.		2021
		Oviedo , FL	32765	2021 JUL
				de James
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
		The same of 15220 regarded Agent and of 15170 registered	Onice address.	
		Wendy Baker NEW Registered Office Address:		_ 80 =
		CONTRACTOR		
		221 Hillcrest Drive		_
		Oviedo , FL	32765	
				
H) ch	the li	imited liability company is not organized under the law or changes are made, the Florida street address of the	s of the State of F	lorida, it is hereby confirmed that after the
านั	ent v	vill be identical. Or, in the case of a Florida limited lia	bility company, it	is hereby confirmed that the change(s)
Wê	is/wi	ere authorized by an affirmative vote of the members of cles of organization or the operation agreement of the l	f the limited liabil	ity company or as otherwise provided in
	، ۱۱۱ د	cles of vigality and of the operating agreement of the	minico naomity co	mpany,
	X.	ture of a member or authorized epresentative of a member	Wendy Baker	Printed or typed name of signee
		/ '		
DF	OVISI	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p	ocriormance of my	: duties, and I am familiar with and accept-
to	r obl mere	igutions of my position as registered agent as providea ely reflect a change in the registered office address. I h	l for in Chapter 66	15. F.S. Or, if this document is being filed -
no	ujiva	l'in writing of this change.		
Si	X gnatu	re of Registered Agent		

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