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SECRETARY OF STATE

TO BY 2:

COVER LETTER

Division of Corporations		
RVZZIAN LLC SUBJECT:		
	mited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
LOVETTE DOBSON		
Name of Person		
INCFILE.COM LLC		
Firm/Company		
17350 STATE HWY 249 #220		
Address		
HOUSTON, TX, 77064		
City/State and Zip Code		
EFILE1234@INCFILE.COM		
E-mail address: (to be used for future annual repo	ort notification)	
For further information concerning this matter, please of	call:	
LOVETTE DOBSON at (388 462-3453	
Name of Person	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	t:	
■ \$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.

<u>Notalia</u> Ferrandes	I. Na	ame of the limited liability company: RVZZIAN LLC		
Principal office address of limited liability company: (Nate: MIST BE STREET ADDRESS) 3901 NW 79TH AVE, STE 245 #3823 MIAMI, FL 33166 MIAMI	2 (a)		(b)	
MIAMI, FL 33166 Date of filing/registration in Florida	(-)	Principal office address of limited liability company:		Mailing address of limited liability company:
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: LEGALING CORPORATE SERVICES INC. Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 5237 SUMMERLIN COMMONS SUITE 400 FORT MYERS FORT MYERS FL 33907 Pagistered Office Address: Natalia Fernandes New Registered Office Address: Natalia Fernandes New Registered Office Address: 843 Rich Dr Api 207 Deerfield Beach FL 33441 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Matalia Fernandes Natalia Fernandes Natalia Fernandes Natalia Fernandes Printed or typed name of signee I hereby accept the appointment as registered agent and complete performance of my duties, and I am familiar with and accept to mereby reflect or change in the company. In Chapter 603, F.S. Or. If this document is being filed to mereby reflect of chapter on the company of the control of the Company of the Compa		3901 NW 79TH AVE, STE 245 #3823	3901 N	RW 79TH AVE, STE 245 #3823
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