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COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT: Olga NUShiayiva, PLLC Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fec(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Olaga Numayava Name of Person
Olga Nushiayaa, Plic
14286 Begin Blvd SIC 19-361 Address Jaivionnili, FL 32250
Jacksonnic, FL 32250 Scaleny/State and Zip Code
Olgan 1996 @ Sman.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Olga Nushi ayiya at (386) 986 - 9804 Area Code & Daytime Telephone Number
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303
Enclosed is a check for the following amount:
□ \$25 Filing Fee
20000, 1100 (45C1, 25C

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: Olga Nusniayeva, (LLC	
2 (0)	me of the limited liability company: Olga Nusniayeva, (LLC 14286 Beach Blod (b) 14286 Beach Blod	
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)	
	Ste 19-361 Ste 19-361	
	Juckjonville Beach, FL 32250 Juckjonville Beach, FL 3	32250
	Date of filing/registration in Florida L \$10003 79858 Document number	
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:	
	One Independent Devel 3300 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	Jacksonville FL 32202	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	NEW Registered Office Address:	
	NEW Registered Office Address:	
	Ste 19-361	
	Jacksonville Beach FL 32250	
change agent www.was/we the articles Signate I hereb provisite the oblit to mere	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. Of a No Shay of a No Shay of the proper and complete performance of my duties, and I am familiar with and accept in the statutes relative to the proper and complete performance of my duties, and I am familiar with and accept in the registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been the confirmance of this change.	
Signatur	e of Registered Agent	