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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| (Quainess Freih), No. 22 |
| (Business Entity Name) |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER .

| TO: Registration Section Division of Corporations | | | | | | | |
|--|--|--|--|--|--|--|--|
| SUBJECT: Christian Cassidy Name of Limited Lia | LLC bility Company | | | | | | |
| Dear Sir or Madam: | | | | | | | |
| The enclosed Registered Agent/Registered Office Change and for | ee(s) are submitted for filing. | | | | | | |
| Please return all correspondence concerning this matter to the fo | ollowing: | | | | | | |
| Christian Cassidy Name of Person Christian Cassidy (16 | | | | | | | |
| Christian Casady CLC Firm/Company | | | | | | | |
| 5005 Cypiess Rd, #3 | _ | | | | | | |
| Pompano Beach Fl 33060 City/State and Zip Code | | | | | | | |
| E-mail address: (to be used for future annual report notific | cation) | | | | | | |
| For further information concerning this matter, please call: | | | | | | | |
| Christian C at (954) Name of Person | 3/9/1055 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: | | | | | | | |
| S \$25 Filing Fee □ \$5: | \$25 Filing Fee | | | | | | |

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. Name of the limited liability company: Christian Cassidy UC 2. (a) 500 S Cyperst Rd #3 Principal office address of limited liability company: (Name MIST BE STREET ADDRESS) Pompany Beach, FC , 33060 Date of filing/registration in Florida Document number 5. (a) 2003/38832 Date of filing/registration in Florida Registered Agent and Registered Office shawn on the records of the Florida Dept. of State: 336 E. College Ave, S. t. 301 Registered Agent and Registered Agent and/or NEW Registered Office address: Tall Chasses (b) 2005/14/2022 (c) 14 2000/3/38832 Date of filing/registration in Florida Registered Agent and Registered Agent and/or NEW Registered Office address: Tall Chasses Tall Chasses Tall Chasses Tall Chasses Tall Chasses Tall Chasses The Tall Chasses Tall Chasses The Tall Chass | | | | | | | , , | | |
|--|-------------------------------|---|--|---------------------------|---|--|---|--|--|
| Principal office address of limited liability company: (Nate: MIST BE STREET ADDRESS) Pompan Beach, FL 33060 Date of filling/registration in Florida 4. Document number S. (a) ConBusiness Inc. Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 336 E. College Aue, S., & 301 Registered Office Address (MIST BE FLORIDA STREET ADDRESS) Enter name of NEW Registered Agent and/or NEW Registered Office address: See S. (b) Christian Cassal 43 NEW Registered Office Address: Pompan Beach FL 33060 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 Intelligiblity 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. Significant of a member of organization or the operating agreement of the limited liability company. Christian Cassal Fined or typed name of signee Printed or ty | L. No | nne of the limited liability company: | hristia | <u> </u> | C955 | -idy L | LC | | · |
| Principal office address of limited liability company: (Nate: MIST BE STREET ADDRESS) Pompanu Beach, FL 33060 Date of filling/registration in Florida Document number S. (a) ConBusiness Inc. Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 336 E. College Aue, St. & 301 Registered Office Address MIST BE FLORIDASTREET ADDRESS) (b) Christian Cassal Emeranane of NEW Registered Agent and/or NEW Registered Office address: Soo S Christs Road #3 NEW Registered Office Address: Pompanu Beach FL 33060 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 himsel liability company is 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 or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Christian Cassal Fineduce of proper and complete performance of my duties, and I am lamiliar with and accept the approxisions of all stantices relative to the proper and complete performance of my duties, and I am lamiliar with and accept the abbiguious of my position as registered agent and provided for in Chapter 605, F. S. Or, I finis document is being filled to more of anyting of the purpose. The Position of the proper and complete performance of my duties, and I am lamiliar with and accept the approxisions of all stantics relative to the proper and complete performance of my duties, and I am lamiliar with and accept the albiguious of my position as registered agent and provided for in Chapter 605, F. S. Or, I finis document is being filled to more of a my trip of the proper a | 2. (a) | 560 S Cypress Rd, #3 | | (b) | 500 | 5 Cypie | er Rd, | 43 | |
| Date of filing/registration in Florida Document number 2 | | Principal office address of limited liability comp | any: | () = | | lailing address c | of limited hab | ility comp | • |
| Date of filing registration in Florida 4. Document number 2 | | Pompano Beach, EL, 330 | 060 | | Por | sin Bu | ach, Fl | ز کر ر | 060 |
| Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 3 3 6 E. College Ave, Sc. to 30 1 Registered Office Address. (MUST BE FLORIDA STREET ADDRESS) Tall chasses FL 32301 Enter name of NEW Registered Agent and/or NEW Registered Office address: 500 S Cyprest Road. #3 NEW Registered Office Address: FL 33060 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 aftirmative 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. Signature of a member of authorized representative of a member Printed or typed name of signee Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, FS. of this document is being filed to mereby reflect a change in the registered affice address, I hereby confirm that the limited liability company has been notitled in writing of this change. | | Date of filing/registration in Florida | '/ | _ | | | · | <u>ـــ</u> | |
| Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Tallahassee (b) Christian Cassol Enter name of NEW Registered Agent and/or NEW Registered Office address: 500 S Cypiss Road # 3 NEW Registered Office Address: FL 33060 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. Signature of a member or authorized representative of a member Printed or typed name of signee Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept to merely reflect a change in the registered agent as provided for in Chapter 605, F.S. Or, if his document is being filed to merely reflect a change in the registered agine as provided for in Chapter 605, F.S. Or, if his document is being filed to merely reflect a change in the registered agine as provided for in Chapter 605, F.S. Or, if his document is being filed to merely reflect a change in the registered agine as provided for in Chapter 605, F.S. Or, if his document is being filed to merely reflect a change in the registered agine supervised for in Chapter 605, F.S. Or, if his document is being filed to merely reflect a change in the registered agine as provided for in Chapter 605, F.S. Or, if his document is being filed to merely reflect a change in the registered agine as provided for in Chapter 605, F.S. Or, if his document is being filed. | 5. (a) | ZenBusiness Inc. | | | | | | | |
| Registered Office Address Tallahassee FL 32301 Enter name of NEW Registered Agent and/or NEW Registered Office address: 500 S Cypiss Road #3 NEW Registered Office Address: FL 37060 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. Signature of a member or authorized representative of a member Printed or typed name of signee Thereby accept the appointment as registered agent and agree to act in this capacity. If urther agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am Jamiliar with and accept the obligations of my sosition as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered affice address, Thereby confirm that the limited liability company has been notitied in writing of this change. C7/07/dw3 | | • | * | | ept. of State | : | | | |
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