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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	ECT:					
	Nam	Name of Limited Liability Company				
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.			
Please	return all correspondence concerning thi	s matter to the	following:			
ALEX	KANDRE MAI					
	Name of Person		_			
VVV	ENTERPRISE LLC					
	Firm/Company		websites.			
158 F	PLUMAGE LN					
	Address					
WES	T PALM BEACH, FL 33415					
	City/State and Zip Code					
MYH	OMECONTRACT@GMAIL.COM					
Е	E-mail address: (to be used for future ann	ual report notif	ication)			
For fur	rther information concerning this matter,	please call:				
ALEX	(ANDRE MAI	703	973-5388			
	Name of Person		Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.0	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314			
Enclosed is a check for the following amount:						
	■ \$25 Filing Fee	- \$:	55 Filing Fee & Certified Copy			
INHS1	8 (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. N	ame of the limited liability company: VVV ENTER	PRISE L	LC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 7090 BALMORAL FOREST RD	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 158 PLUMAGE LN
	CLIFTON, VA 20124		WEST PALM BEACH, FL 33415
	MARCH 25, 2013	r	и130000018 64
3.	Date of filing/registration in Florida	_ _{4.} _	Document number
(b)		33406	<u>ress:</u>
	NEW Registered Office Address: 158 PLUMAGE LN		EP 20 PM
	WEST PALM BEACH , FI	_L 33415	9.
the cha agent was/w the art	timited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the regist iability cor of the limit limited lia	ered office and the business office of the registered appany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company. XANDRE MAI
I here provis the ob to mer notifie	ature of a thember or authorized representative of a member by accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I ad in writing of this change. ure of Registered Agent	ree to act i performa ed for in Ci hereby coi	Printed or typed name of signee in this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed after that the limited liability company has been