M1700000 2667

(Requestor's Name)				
(Addre	ss)			
(Addre	ss)			
(City/S	tate/Zip/Phone #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates o	f Status		
Special Instructions to Filing Officer:				
		ī		

Office Use Only



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05/09/18--01020--022 **25.00

SECRETARY OF STATE ALLAHASSEF FIORINA

FILED

TO:

PHYSICAL: Dept. of State Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING:

Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM:

National Corporate Headquarters, Inc.

5605 Riggins Court Suite 200

Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE:

Thursday, April 05, 2018

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Change of Registered Agent

For **INVEST IN FAMILY, LLC**

We have included payment in the amount of \$25.00 for the following fees:

• Change of Registered Agent

We have included one original and one copy of the Articles.

If there are any questions, please call 800-542-2077

Please return the file stamped copy of the Articles to the address below:

Renewal Department 5605 Riggins Court Suite 200 Reno NV 89502 Attn: Judi Anguiano

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: INVEST I	IN FAMIL	Y, LLC	
2. (a)			Mailing address of limited lia	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) / 0050 Oasis falm Dr.	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		
	Tampa, FC 33615			
	03/27/2017	M170	00002667	
3.	Date of filing/registration in Florida	4.	Document number	<u></u>
5. (a)	BUSINESS FILINGS INCORPORATED			
J. (4)	Registered Agent and Registered Office shown on the records of the	he Florida Dept, of S	State;	
	1200 SOUTH PINE ISLAND ROAD		ي کا	22
	Registered Office Address (MUST BE FLORIDA STREET A	IDDRESS)	LARCE ASS	₹ n
	PLANTATION ,FL	33324	000 E1-30	8
(b)	Registered Agents Inc.		TELORIO,	ë E C
` ,	Enter name of NEW Registered Agent and/or NEW Registered	Office address:		202
	3030 N. Rocky Point Dr.			
	NEW Registered Office Address:			
	STE 150A			
	Tampa .FL	33607		
the cha agent v was/wa	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cless of organization or the operating agreement of the law	the registered of bility company, f the limited liab	fice and the business office it is hereby confirmed that fility company or as otherw	of the registered the change(s)
Signa	ture of a member of authorized representative of a member	-	Printed or typed name of si	gnee
provisi the obl to mer	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete i igations of my position as registered agent as provided ely reflect a change in the registered office address, I have this change. Bill Havre - Assistant	performance of i i for in Chapter (nereby confirm th	capacity. I further agree to my dulies, and I am familia 603, F.S. Or, if this docum hat the limited liability com	o comply with the ir with and accept tent is being filed apany has been