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(Requestor's Name)		
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(Business Entity Name)		
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COVER LETTER

Registration Section Division of Corporations

TO:

INHS18 (2/14)

SUBJECT: Stage 3 Business Name of Limi	o Development Lic	
Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Michelle Sarapura Name of Person		
Stage 3 Business Development LCC Firm/Company		
8973 Cakes Blud		
West Palm Beach FL 33412 City/State and Zip Code		
Michelle @ maycorelle. Com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Michelle Sarapula at (561) 324-1531 Name of Person Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
S25 Filing Fee	S55 Filing Fee & Certified Copy	

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

innata.	
1. Name of the limited liability company: Stage 3 Business De	velopment LCC
, , ,	ICOS BIJA 288 of limited liability company: (Y BE POST OFFICE BOX)
West Palm Beach FL 33412 West Pals	
Aug 14, 2017 Date of filing/registration in Florida M170000 Document	•
5. (a) Registered Agents Inc. Registered Agent and Registered Office hown on the records of the Florida Dept. of State:	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
Suite 150A Tampa FL 33607	2018 SEC SAC
(b) Michelle Sangura Enter name of NEW Registered Agent and/or NEW Registered Office address:	AUG 24 RETASY
8973 Lakes Blud- NEW Registered Office Address:	PR 2: 09 OF STATI
West Palm Beach, FL 334/2	; 1: W
, FL	
If the limited liability company is not organized under the laws of the State of Florida, it is is the change or changes are made, the Florida street address of the registered office and the buagent will be identical. Or, in the case of a Florida limited liability company, it is hereby cowas/were authorized by an affirmative vote of the members of the limited liability company the articles of organization or the operating agreement of the limited liability company.	usiness office of the registered onlimed that the change(s) or as otherwise provided in
Signature of a member or anthorized representative of a member Printed or ty	Sorapura yped name of signee

I hereby 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, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent