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## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: Laura Christin Photography LLC Name of Limited Likebility 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:						
Laura Christin Name of Person						
Laura Christin Photography LLC Firm/Company						
16109 18+ St. E Address						
Redington Beach FL 33708 City/State and Zip Code						
E-mail address: (to be used for future annual report hotification)						
For further information concerning this matter, please call:						
Laura Christin at (U19) 578-4228  Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Division of Corporations Clifton Building Clifton Build						
Enclosed is a check for the following amount:						
\$25 Filing Fee \$\Bigcup \$55 Filing Fee & Certified Copy						

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. Na	une of the limited liability company: Lawra	Chris	in Ph	otoaraor	y LL	C
2. (a)	, , , , , , , , , , , , , , , , , , , ,	(b		7'''	,	
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	•	Ма	iling address of limited Note: MAY BE POST		•
	16101 15+ StE		16109	18+ St	E	<del></del>
	Redington Beach FL 337	<u>0</u> 8	Redin	gton Basc	HFL	337
3.	2/11/2019 Date of filing/registration in Florida	_ 4.	M19	00000 1	775	<u>,                                     </u>
5. (a)	LAWYA CHYISTIN Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State:			
(b)	Registered Office Address (MUST BE FLORIDA STREET)  2160 Water Oak Dr  Clearwater .FL  Laura Christin  Enter name of NEW Registered Agent and/or NEW Registered	N . 33	764	THELAHASSLE	2019 AUG 15 AM 8:	
	NEW Registered Office Address:				8:58	J
	Redington Beach .FL	. 33	708			
the cha agent v was/we the arti	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 li- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the authorized representative of a member	the regise ability confithe lim	stered office a impany, it is h ited liability c iability compa	nd the business off ereby confirmed the company or as other any.	ice of the renat the change wise provide	egistered ge(s)
I herei provisi the obl to mere	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I i I in writing of this change	ree to act performa d for in ( hereby co	in this capac ance of my du Thapter 605, I onfirm that the	ity. I further agree ties, and I am fami S.S. Or, if this doc e limited liability c	to comply liar with an ument is bei	with the d accept ing filed been

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00