## M19000002014

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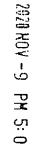
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## COVER LETTER

TO: Registration Section Division of Corpor <b>கு</b> ions		
GREEN EDVENTU	JRES LLC	•
	Name of Limited Li	ability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Regis	tered Office Change and	fee(s) are submitted for filing.
Please return all correspondence conc	erning this matter to the (	following:
Ashley Canez		
Name of Pers	son	<del></del>
EastBiz.com		
Firm/Compa	ny	_
5348 Vegas Dr		
Address		
Las Vegas, NV 89108		
City/State and Zi	p Code	<del></del>
E-mail address; (to be used for t	future annual report notifi	eation)
For further information concerning th	is matter, please call:	
Ashley Canez	702 at (	\$71-8678
Name of Person		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 t	following amount:	
■ \$25 Filing Fee	□ SS	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.

	me of the limited liability company:	53-	48 Vegas Dr. #1102 Las Vegas, NV 89108
(a)	Principal office address of fimited liability company:  (Note: MUST BE STREET ADDRESS)	(b) <u></u>	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
			· · ·
	02/27/2019		M19000002014
. (a)	Date of filing/registration in Florida CORPORATE CREATIONS NETWORK INC.	4.	Document number
. (4)	Registered Agent and Registered Office shown on the records 13916 Bramble Bush Ct	of the Florida Dep	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	2020 NOV -
	Orlando	Fi32832	
(b)	Patricia A. Floyd		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	Enter name of NEW Registered Agent and/or NEW Register	ed Office address	
	13916 Bramble Bush Ct		
	<u>NEW</u> Registered Office Address:		
	Orlando	FL 32832	
hange gent v vas/we he arti	imited liability company is not organized under the or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member cles of organization of the operating agreement of the parties of a member or authorized representative of a member by accept the appointment as registered agent and a close of all statutes relative to the proper and completing agents of my position as registered agent as provided to the proper and completing the registered agent as provided to the proper and completely reflect a change in the registered office address.	he registered of liability compa s of the limited he limited liabil	ffice and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in lity company.  Printed or typed name of signee  this connective. I further were to comply with the