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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Phone : (323) 962-8600 Fax Number : (323) 962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

REGISTERED AGENT CHANGE LIFETIME SISTERS INTERNATIONAL INC.

Certificate of Status	U
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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: LIFETIME SISTERS INTERNATIONAL INC. Name of Corporation				
·				
DOCUMENT NUMBER: N1800000839				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Cheyenne Moseley				
Name of Contact Person				
Legalzoom.com, Inc.				
Firm/Company				
101 N Brand Blvd., 11th Floor				
Address				
Glendale, CA 91203				
City/State and Zip Code				
missymonokian@gmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Cheyenne Moseley, Legalzoom.com, Inc. at (800 773-0888 ext 9724 Area Code & Daytime Telephone Number				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Amendment Section Amendment Section				

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chai	nge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida Status on organized under the laws of the State of Florid	ta
		or registered agent, or both, in the State of Floria SISTERS INTERNATIONAL	
2. The principal	office address: 8422 NW 66	6 ST MIAMI, FL 33166	
3. The mailing a	ddress (if different): PO Box	835131 MIAMI, FL 33283	
4. Date of incorp	oration/qualification: 01/25/2	/2018	00839
5. The name and		gistered agent and registered office on file with th	ie
	UNITED STATES COR	RPORATION AGENTS, INC.) H
	13302 WINDING OAKS	S BLVD., SUITE A	20 1
	TAMPA, FL 33612		1020 JAN 22
6. The name and (if changed):	I street address of the new registe	ered agent (if changed) and /or registered office	· · · · · · · · · · · · · · · · · · ·
	United States Corporat	tion Agents, Inc.	177TE
5575 S. Semoran Blvd. Suite 36			
	Orlando, FL 32822). Box NOT acceptable	
The street address changed will	ess of its registered office and the be identical.	he street address of the business office of its reg	jistered agent,
Such change wa	es authorized by resolution duly	adopted by its board of directors or by an office been notified in writing of the change.	
Me D	re of an afficer or overeiter	MELISSA MONOKIAN, PRE	SIDENT
I hereby accept I further agree of performance of	the appointment as registered a to comply with the provisions of my duties, and I am familiar wi is document is being filed merel	agent and agree to act in this capacity. If all statutes relative to the proper and complete ith and accept the obligation of my position as i ly to reflect a change in the regislered office ad notified in writing of this change.	registerea
	0 m	01/22/2020	
Sig	nathre-of Registered Agent	Duic	
Cheyenne Mosele	chalf of an entity; y, assistant secretary on behalf of poration Agents, Inc.	<u></u>	
T	yped or Printed Name		

* * * FILING FEE: \$35.00 * * *