

P15000042189

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF REVENUE
FACILITY

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LE BOUQUET BY FRANCIS INC

Name of Corporation

DOCUMENT NUMBER: P15000042189

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:

FRANCIS PEYRONNET

Name of Contact Person

LE BOUQUET BY FRANCIS INC

Firm/Company

2855 GULF TO BAY BOULEVARD APPT 8409

Address

CLEARWATER, FLORIDA 33759

City/State and Zip Code

francis.peyronnet@lebouquetbyfrancis.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANCIS PEYRONNET

Name of Contact Person

at (813) 580 9709

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

Street Address:

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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LE BOUQUET BY FRANCIS INC
2. The principal office address: 2855 GULF TO BAY BOULEVARD APPT 8409
CLEARWATER, FLORIDA 33759
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/11/2015 Document number: P15000042189

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

ALBERT MAGGIO B, JR,

C/O CRGO LAW, 7900 GLADES ROAD, SUITE 520

BOCA RATON, FLORIDA 33434

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

FRANCIS PEYRONNET

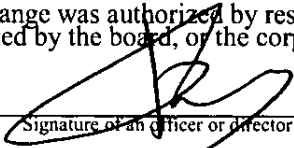
2855 GULF TO BAY BOULEVARD APPT 8409

P.O. Box NOT acceptable

CLEARWATER, FLORIDA 33759

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

FRANCIS PEYRONNET

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent

OCTOBER 4, 2015

Date

If signing on behalf of an entity:

FRANCIS PEYRONNET

Typed or Printed Name

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

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STATE OF FLORIDA
DIVISION OF CORPORATIONS