

(Requestor's Name)					
(Address)					
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(0) (0) . (7) (0)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
,					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





06/01/18--01022--001 **25.00

COVER LETTER

то:	Registration Section Division of Corporations						
SUBJ	NFNTY Business Solutions	, LLC					
		me of Limited L	iability Company	.			
Dear S	Sir or Madam:						
The e	nclosed Registered Agent/Registered Of	Tice Change and	l fee(s) are submitted for filing	; .			
Please	return all correspondence concerning the	his matter to the	following:				
Reja	ne M Khawam						
	Name of Person						
NFN	TY Business Solutions, LLC						
	Firm/Company		_	:			
1740	Arabian Lane			·- -			
	Address			. ل			
Palm	Habor, fl, 34685						
	City/State and Zip Code		<u> </u>				
corre	spondence@nfntysolutions.com						
}	E-mail address: (to be used for future an	nual report noti	ication)				
For fu	rther information concerning this matter	, please call:					
Rejar	ne M Khawam	727 at (224-8235				
	Name of Person	\	Area Code & Daytime Telep	phone Number			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.0	gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314				
	Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	<u> </u>	55 Filing Fce & Certified Copy	<i>'</i>			

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. N	ame of the limited liability company: Mfnty Busines	s Solu	tions, LLC	;		
2. (a)	13046 Racetrack Road	a	(b) 13046 Racetrack Road			
Z. (II)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ '		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Suite 269		Suite 26	9		
	Tampa, Florida 33626	_	Tampa,	Florida 33626		
	May 17, 2018		L1800012	23796		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	Rejane M Khawam					
υ. (u)	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State	- c:		
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	1740 Arabian Lane					
	Palm Habor	34685		-		
	, 112_			-		
(b)	Maria Theresa Gamboa			_		
Enter name of NEW Registered Agent and/or NEW Registered Office address:						
	13046 Racetrack Road					
	NEW Registered Office Address:			-		
	Suite 269					
				•		
	Tampa , FL	33626		_		
the cha agent v was/wa	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regist bility contains the lim	stered office impany, it is sited liability	and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in		
- Alwan			ane M Kh			
	ture of amember or authorized representative of a member			Printed or typed name of signee		
provisi the obl to meri	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I he I in synting of this change.	e to act erforma for in C ereby co	in this cape ance of my a Chapter 605 Onfirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been		
	186 Jamban					
Signatu	re of Registered Agent					