Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230001339383)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

**Enter	the	email	address	for	this	busine	255	entity	to Ł	oe u	sed	for	fûtur	e
an	nual	report	t mailin	gs.	Enter	only	one	email	addr	ess	plea	ase.	**	

Email Address:_____

LLC REGISTERED AGENT CHANGE ANDES DEV LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

T. LEMIEUX Help APR 1 1 2023

Electronic Filing Menu Corporate Filing Menu

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. Nan	ne of the limited liability company: Andes D	ev LLC	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	11/04/19		000275095
3.	Date of filing/registration in Florida	4.	Document number
_	GAGEL, JAMES		
ŗ	degistered Agent and Registered Office shown on the records o	f the Florida Dept. of	f State:
	2525 PONCE DE LEON BLVD	<u> </u>	
1	Registered Office Address (MUST BE FLORIDA STREET	<u> "ADDRESS)</u>	
	SUITE 300		
	CORAL GABLES . F	т. 33134	
-		***************************************	2
16.7	Registered Agents Inc		2023 Aca
E	inter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office address:	
	7901 4th St N		10 AH II: 24
-	NEW Registered Office Address:		
	STE 300		י 11: 21: 13:
-		<u>u</u>	<u> </u>
	St. Petersburg "	_L 33702	, *
the chan agent wi was/were the article	nited liability company is not organized under the lage or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited I authorized by an affirmative vote of the members es of organization or the operating agreement of the	of the registered o liability company, of the limited lial	office and the business office of the registered, it is hereby confirmed that the change(s) ability company or as otherwise provided in
	e of a member or authorized representative of a member		Robin Jones
Signatu	e of a member or authorized representative of a member		Printed or typed name of signee
provisión the oblig to merel	accept the appointment as registered agent and ag as of all statutes relative to the proper and complete ations of my position as registered agent as provide a reflect a change in the registered office address. I in writing of this change. David Roberts - Assistan	e performance of ed for in Chapter hereby confirm t	capacity. I further agree to comply with the f my duties, and I am familiar with and acce or 605, F.S. Or, if this document is being file that the limited liability company has been