N20000308615

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C. BRUMBLEY SEP 3 0 2022

COVER LETTER

TO:	Registration Section Division of Corporations							
et:pir	CCT: 155 BINARY LIVING LLC							
SORIF		Name of Limited L	iability Company					
Dear Si	ir or Madam:							
The end	closed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.					
Please 1	return all correspondence concernin	g this matter to the	following:					
Meliss	a Jones							
	Name of Person							
ZenBus	iness Inc.							
	Firm/Company	· · · · · · · · · · · · · · · · · · ·						
336 E.	College Ave. Suite 301							
	Address							
Tallaha	ssee, FL 32301							
	City/State and Zip Coo	le						
ra@zen	business com							
E	-mail address: (to be used for future	annual report notif	ication)					
For fur	ther information concerning this ma	tter, please call:						
Melis	ssa Jones	844 at (493-6249					
	Name of Person	ai (Area Code & Daytime Telephone Number					
	Mailing Address: Registration Section		Street Address: Registration Section					
	Division of Corporations		Division of Corporations					
P.O. Box 6327			The Centre of Tallahassee					
	Tallahassee, FL 32314		2415 N. Monroe Street. Suite 810 Tallahassee. FL 32303					
	Enclosed is a check for the follow	ring amount:						
	☐ \$25 Filing Fee	□ \$	55 Filing Fee & Certified Copy					
INHS18	3 (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	Jame of the limited liability company: 155 BINA	RYL	IVING	LLC				
2. (a)	1718 CAPITOL AVENUE		(b) 1718 CAPITOL AVENUE					
Z. (a,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	CHEYENNE, WY 82001		CHEY	ENNE, W	/Y 8	200)1	
					<u> </u>			
				••				
	09/30/2020	_	L20000	0308615				
3.	Date of filing/registration in Florida	4.		Document num	ber			
5. (a	Registered Agents Inc.							
`	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of State	· :				
	7901 4th St N							
	Registered Office Address (MUST BE FLORIDA STREET	4DDRES	27		3E	2022 JUL		
	STE 300			L			TI	
	St. Petersburg , FI	33702			J.	-5	F	
(b	ZenBusiness Inc				ο. 100 100 100 100 100 100 100 100 100 10	AM :: 37	M	
` '	Enter name of NEW Registered Agent and/or NEW Registered	Office ac	ldress:	- !*	iğ (ယ		
	336 E. College Ave.				****	7	QD	
	NEW Registered Office Address:	- -		-				
	Suite 301			_				
	Tallahassee, FI	32301		_				
chang	limited liability company is not organized under the law se or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited his	register	ed office and	I the business of	ffice of	the r	egistered	
was/v	vere authorized by an affirmative vote of the members of	of the lin	nited liability	company or as				
	ticles of organization or the operating agreement of the /s/ Jason Smith Copy		son Smit	• -				
	nature of a member or authorized representative of a member	<u> </u>	3011 311111	Printed or typed n	ame of s	ignee		
provi the or to me notifi	eby accept the appointment as registered agent and agrissions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I defin writing of this change. Thus of Registered Agent	ree to act perform d for in c hereby c	t in this capa ance of my a Chapter 605, onfirm that t	ncity. I further of huties, and I am F.S. Or, if this he limited liabil	igree to Jamilia docun ity con	o com ir wit nent i npany	ply with the h and accept s being filed has been	