## L21000053137

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W. C. C. C.

## COVER LETTER

Division of Corporations						
SUBJECT: Singing Mamas Homestad, LLC Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Stacey Menton Name of Person						
Singing Mamas Homestead, LLC Firm/Company						
7518 International Village Dr. Address						
Jackson v. Ne FL 32277 City/State and Zip Code						
Stace, menton cicloud. com E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please carr						
Stace Menton at (1010) 246-0869  Name of Person Area Code & Daytime Telephone Number						
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303						
Enclosed is a check for the following amount:						

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

## 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	Name of the limited liability company:	H	amas_	1 tomestead	
2. (a)		(ն)_		International Villagaddress of limited liability company:	te Dr.
	(Note: MUST BE STREET ADDRESS)			te: MAY BE POST OFFICE BOX)	
	Jacksonville FL 32277	-	Jack	sonville, FL 3227	7_
	1/29/2021	_	<u> </u>	00053137	
3.	Date of filing/registration in Florida 4.	•	Doc	ument number	
5. (a					
	Registered Agent and Registered Office shown on the records of the FI	lorida D	ept, of State:		
	Kichard A. Menton IV				
	Registered Office Address (MUST BE FLORIDA STREET ADDI	<u>RESS)</u>			
(b)	Richard A. Menton IV Enter name of NEW Registered Agent and/or NEW Registered Office			BOLLING 19 M T	1 50
	NEW Registered Office Address:			6	)
	7518 International Village	$\mathcal{J}$	1. ve	. ,	
		322	277		
chang agent was/v the ar	e limited liability company is not organized under the laws of ge or changes are made, the Florida street address of the regin will be identical. Or, in the case of a Florida limited liability were authorized by an affirmative vote of the members of the relicles of organization or the operating agreement of the limit mature of a member or authorized representative of a member	istered ty come e limite ted lial	office and the pany, it is hered liability company	business office of the registered eby confirmed that the change(s) npany or as otherwise provided in the change of the registered eby confirmed that the change(s) npany or as otherwise provided in the change of the registered eby confirmed that the change(s) npany or as otherwise provided in the change of the registered eby confirmed that the registered eby confirmed eby	1
provi. The ol	reby accept the appointment as registered agent and agree to isions of all statutes relative to the proper and complete perfolingations of my position as registered agent as provided for The property change in the registered office address, I heref	orman · in Ch	ce of my aune upter 605, F.S	s, and I am jamiliar with and acc Or, if this document is being fil	epi ed

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25,00

Signature of Registered Agent