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TO:

INHS18 (2/14)

Registration Section

Division of Corporations		
GOOD GIRL MOLLY LLC SUBJECT:		
	ame of Limited I	Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered O	ffice Change and	f fec(s) are submitted for filing.
Please return all correspondence concerning	this matter to the	following:
JENNY GREGG		202
Name of Person		
GOOD GIRL MOLLY LLC		22
Firm/Company		
5725 SANDS POINT DR		ာ
Address		
LAKELAND FL 33809		
City/State and Zip Code		
AGOODGIRLMOLLY.COM		
E-mail address: (to be used for future a	nnual report noti	fication)
For further information concerning this matter	er, please call:	
JENNY GREGG	828 at (545-2285
Name of Person		Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following	ng amount:	
■ \$25 Filing Fee	□ 5	555 Filing Fee & Certified Copy

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. Na	ame of the limited liability company: GOOD GIRL MO	OLLY LLO	3				
2. (a)		(b)				
- . ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	5725 SANDS POINT DR		5725 SAN	DS POINT DR			
	LAKELAND FL 33809		LAKELA	ND FL 33809			
	06-28-2021		L210002970	094			
3.	Date of filing/registration in Florida	4.	<u>-</u> -	Document number	_		
5 (a)	UNITED STATESCORPORATION AGENTS, INC						
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of Stat	e:			
	CHEYENNE MOSELEY, US CORP AGENTS						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u> </u>	_			
	5575 S. SEMORAN BLVD 36					20	
	ORLANDO	32822		_	ι.	2022	
	FI	<u>32822</u>		_		F	
(1.5	JENNY GREGG					22	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office ad	dress:		•		•
						Ś	
	5725 SANDS POINT DR			_	;	(သ (သ	
	NEW Registered Office Address:						
	LAKELAND	. 33809		-			
	, FI	L		_			
change agent v was/we the arti	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization of the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agreement of the operations.	e registere ability co of the lim limited l	ed office an mpany, it i ited liabilit iability con NY GREGO	d the business offices hereby confirmed to your company or as oth npany. I Printed or typed name	e of the	e regist e chang e provid	ered ge(s) ded in
provisi the obi to mer notified	no accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I din writing of this change	performa d for in C	ince of my i Chapter 605	duties, and I am Jam 5 F.S. Or. if this doc	uliar v cumen	vith and it is bei	1 accept ng filed

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (2/14)