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(((H22000334173 31))



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To:

Page: 1 of 3

Division of Corporations

Fak Number : (850)617-6383

From:

Account Name : FLEURINGRD LAW PLLC Account Number : 120220020158

: (888)904-2297 Phone : (888)282-8595 Fak Number

> **Enter the email address for this business entity to be used for future annual report mailings. Enter only one enail address please.**

Email Address:_

LLC REGISTERED AGENT CHANGE COTTONTAIL LODGE, LLC

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FAX AUDIT NUMBER: H22000334173-3

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	COTTONTAIL LODGE LLC				
., 0 14113	Name of Limited Liability Company				
Dear Si	r or Madam:				
The enc	losed Registered Agent/Registered	Office Change a	nd fee(s) are submitted for filing.		
Please r	eturn all correspondence concerning	g this matter to th	ne following:		
KIA FLI	EURINORD				
	Name of Person				
FLEURI	NORD LAW PLLC				
	Firm/Company				
20900 N	E 30TH AVE, STE 200				
	Address	· · · · ·			
AVENT	URA, FL 33180				
	City/State and Zip Coc	le	·····		
JHOPPE	@KEYSPECIALTY.COM				
Е-	mail address: (to be used for future	annual report no	tification)		
For furt	her information concerning this mat	ter, please call:			
JESSIC.	А ПОРРЕ	954 at (643-4828		
	Name of Person	u. \	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 follow	ing amount:			
	■ \$25 Filing Fee	0	\$55 Filing Fee & Certified Copy		

FAX AUDIT NUMBER: H22000334173 3

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	lame of the limited liability company:	.ODGE	LLC	
	Principal office address of limited liability company:			Mailing address of limited liability company:
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company; (Note: MAY RE POST OFFICE BOX)
	7901 4TH ST N, STE 300		7901 4TH	ST N, STE 300
	ST. PETERSBURG, FL 33702			RSBURG, FL 33702
	ST. PETERSBORG, PD 55702			ASSOCIACIÓ DE DESTAC
	07/26/2021		L21000338	490
3.	Date of filing/registration in Florida	_ 4.		Document number
5. (a) HOPPE, JESSICA			
(u	Registered Agent and Registered Office shown on the records of	the Flor	ida Dept. of Sta	te:
	Registered Office Address			_
	7250 SW 52nd Street			<i>∽</i> ~
	MIAMI, FI	33143		FIL 2022 SEP 28 SECRE ANRAY TALL ANNAS
	, Fi			- F F F
(b	1			728 28
ν,	Enter name of NEW Registered Agent and/or NEW Registeres	d Office	address:	FILE EARLY OF
	REGISTERED AGENTS INC.			AMII: 33
	NEW Registered Office Address:			- 33 33
	7901 4TH ST N, STE 300			_
	ST, PETERSBURG	33702		
	ST, PETERSBURG, FI	L		_
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	regist ability of the l	ered office ar company, it imited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	Jessiva Hoppe	J !	ESSICA HOPI	
_	nature of a member or authorized representative of a member			Printed or typed name of signee
provi the oi to me	eby accept the appointment as registered agent and ag sions 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 ed in writing of this change.	ree to o e perfor ed for it hereby	net in this cap mance of my n Chapter 60 confirm that	pacity. I further agree to comply with the duies, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
•	Bill Havre			
Signa	ture of Registered Agent			