## Florida Department of State

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To:

Division of Corporations

To: 18506176383

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

\*#Enter the email address for this business entity to be used for future ,浩浩 annual report mailings. Enter only one email address please.\*\*

Email	Address:		

## LLC REGISTERED AGENT CHANGE 1456 WILLIAM ST, LLC

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EPR 29 2024



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## 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	ame of the limited liability company:		
!. (a)	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)
	12/01/21	L21000	509308
١.	Date of filing/registration in Florida	4.	Document number
	VENERARI E CORROBATE AND TRUCT SERVICES LL		2000
. (a)	VENERABLE CORPORATE AND TRUST SERVICES LL  Registered Agent and Registered Office shown on the records of		C Contain
	301 W PLATT ST NO 657	i ite riorida Dept. ot	i State.
	Registered Office Address (MUST BE FLORIDA STREET	<u>ADDRESS)</u>	
	TAMPA , F	L_33606	<del></del>
(b)	Registered Agents Inc		2024 APR
,0,	Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	AP.
	7901 4th St N		26
	NEW Registered Office Address:		<u></u>
	STE 300		2:
			<u>~</u>
	St. Petersburg	33702 L	
he cha gent v vas/w ne art	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the registered o lability company of the limited lia	office and the business office of the registers, it is hereby confirmed that the change(s) bility company or as otherwise provided in company.
Signa	this wife way		Printed or typed name of signee
l here rovis he ob o mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I do in writing of this change.	rce to act in this e performance of ed for in Chapter hereby confirm t	capacity. I further agree to comply with the my duties, and I am familiar with and acce to 605, F.S. Or, if this document is being file that the limited liability company has been

- Assistant Secretary

**David Roberts** 

Signature of Registered Agent