Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000054425 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)617-6383

From:

Email Address:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

· ·						
= -		LLC REGISTERED AGENT CHANGE FLORIDA FAMILY CATTLE, LLC				
. .	Certificate of Status	0				
	Certified Copy	0				
	Page Count	02				
	Estimated Charge	\$25.00				

Electronic Filing Menu Corporate Filing Menu

Help

FFB 13 Wed

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.

 Na (a) 	nme of the limited liability company: Florida		<u> </u>		
2. (a)	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)	(1		Mailing address of limited (Note: MAY BE POST	liability company:
	7901 4th St N STE 300		7901 41	th St N STE 30	
	St. Petersburg FL 33702		St. Peter	rsburg FL 33702	
	02/23/2022		1	22000096169	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	INC ALITHODITY DA				
J. (a)	INC AUTHORITY RA Registered Agent and Registered Office shown on the record	s of the Florida	Dept. of State	- ∷	
	390 NORTH ORANGE AVE., STE 2	2200.71			
	Registered Office Address (MUST BE FLORIDA STRE		<u></u>	•	
	ORLANDO	222		Vē	~2
	ORLANDO	. FL <u>328</u>	01		2023
(h)	Registered Agents Inc				FFB
(1.7	Enter name of NEW Registered Agent and/or NEW Register	ered Office ad	dress:	•	<u> </u>
	7901 4th St N				#HII: 35
	NEW Registered Office Address:	,		•	- -: ω
	STE 300				<u>.</u> <u>.</u> <u>.</u> .
	St. Petersburg	. _{FL} 33702	2		
If the li	imited liability company is not organized under the	laws of the	State of Flo	vrida lit is hereby con	firmed that after
the cha agent w was/we	inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limite authorized by an affirmative vote of the member cles of organization or the operating agreement of	s of the regised liability co ors of the lim	stered office ompany, it is sited liability	and the business off hereby confirmed the company or as othe	ice of the registere nat the change(s)
	ture of a member or authorized representative of a member		F	Robin Jones	
Signat	ture of a member or authorized representative of a member			Printed or typed name of	f signee
I herel provision the oblination mere	by accept the appointment as registered agent and ons of all statutes relative to the proper and compi igations of my position as registered agent as prov tly reflect a change in the registered office address	agree to act lete perform vided for in (s. I hereby co	in this cape ance of my c Chapter 605 onfirm that i	acity. I further agree duties, and I am fami , F.S. Or, if this doci the limited liability c	to comply with the liar with and accep ument is being filed ompany has been

Signature of Registered Agent

natified in writing of this change.

Da

David Roberts - Assistant Secretary