L22000106377

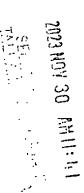
(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	
hA)	dress)	
(1.00	0.000)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
`	•	
Certified Copies	Certificates	of Statue
Certified Copies	_ Certificates	Of Status
Special Instructions to	Filing Officer:	
, 17		
MIK		

Office Use Only



900419499359

11/30/23--01010--004 **25.00



COVER LETTER

то:	Registration Section Division of Corporations						
SUBJE	TANGORRE ENTERPRISES, I	LLC					
SOBAL		Name of Limited Liability Company					
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered	Office Change	e and fee(s) are submitted for filing.				
Please	return all correspondence concernin	g this matter to	o the following:				
C. Todo	d Marks, Esquire / Cheryl Martin, Paral	egal					
	Name of Person	-1-					
Westch	ase Law, PA						
	Firm/Company						
12027	Whitmarsh Lane						
	Address	· · ·					
Tampa,	FI. 33626						
	City/State and Zip Coo	de					
Todd@	WestchaseLaw.com or Cheryl@Westch	naseLaw.com					
Е	-mail address: (to be used for future	annual report	notification)				
For fur	ther information concerning this ma	tter, please cal	l:				
Paul Ta	ngorre, Jr. Name of Person	at ((607) 738-7118 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	ring amount:					
ı	\$25 Filing Fee		☐ \$55 Filing Fee & Certified Copy				
INHS18	R (2/14)						

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: TANGORRE E	ENTERPRI	SES, LLC				
2. (11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		,	Mailing address of lim	g address of limited liability company: w: MAY BE POST OFFICE BOX)		
	11310 Georgetown Circle 11310 Georgetown Circle			eorgetown Circle			
	Tampa, F1. 33635		Tampa, I	TL 33635			
	03/15/2022		L2200010	6377			
3.	Date of filing/registration in Florida	4.		Document number	er		
5. (a)							
(,	Registered Agent and Registered Office shown on the records Gary B. Frese	of the Florid	la Dept. of St	tate;			
	Registered Office Address (MUST BE FLORIDA STREE	TADDRES	(S)	<u> </u>	=1 2	ن 2	
	2200 Front Street, Suite 301		<u> </u>		SEC.	<u> </u>	
	Melbourne	32901 FL		_		NOV 30	
						٠٠٠ سو	
(b)	Enter name of NEW Registered Agent and/or NEW Register	1.73/4				Bid 11: 4 1	
	Enter name of NEW Registered Agent and/or NEW Register	red Office a	ddress:		•		
	C. Todd Marks, Esquire						
	NEW Registered Office Address:						
	12027 Whitmarsh Lane			<u> </u>			
	Tampa	FL 33626					
change agent was/w the art Signat There provis the obsto mer	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member icles of organization or the operating agreement of the member of a member	laws of the he register liability c s of the limited Par	red office a company, it mited liabil liability ecol Tangorre, et in this ca	and the business officis hereby confirmed ity company or as o ompany. Jr. Printed or typed name analysis of the first transfer and the first transfer and the first transfer and transfer	ice of the reg d that the cha otherwise pro me of signee	istered ange(s) vided in	

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

Signature of Registered Agent