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Division of Corporations

Florida Department of State  
Division of Corporations  
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**LO1000019305**

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : TRIPP SCOTT, P.A.  
Account Number : 075350000065  
Phone : (954)525-7500  
Fax Number : (954)761-8475

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

Email Address: \_\_\_\_\_

**LLC REGISTERED AGENT CHANGE  
THIES FAMILY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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SEP 28 2023

K. Brumley

H23000340175

# 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. Name of the limited liability company: THIES FAMILY, LLC
2. (a) 4021 NE 18TH AVE  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
OAKLAND PARK, FL 33334
- (b) 4021 NE 18TH AVE  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
OAKLAND PARK, FL 33334
3. 11/07/2021  
Date of filing/registration in Florida
4. L01000019305  
Document number
5. (a) THOMAS J. THIES  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
4021 NE 18TH AVE  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
OAKLAND PARK, FL 33334
- (b) TRIPP SCOTT, P.A.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
ATTN: TANYA L. BOWER, ESQ  
NEW Registered Office Address:  
110 SE 6TH STREET, 15H FLOOR  
FORT LAUDERDALE, FL 33301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Tanya L. Bower  
Signature of a member or authorized representative of a member

TANYA L. BOWER, ESQ, Authorized Representative  
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Tanya L. Bower  
Signature of Registered Agent

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

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