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ALLYANASSEE FLORIDA

16

COVER LETTER

TO:	Registration Section Division of Corporations						
	• 2						
SUBJE	ECT: Special Communications, LLC						
	Nai	me of Limited L	iability Company				
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Of	fice Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning th	nis matter to the	following:				
Margar	ret S Crowley						
	Name of Person						
Special	Communications, LLC Firm/Company	· · · · · · · · · · · · · · · · · · ·	<u> </u>				
1985 N	IW 30th Place						
3731	Address						
Gaines	ville, FL 32606						
	City/State and Zip Code						
E-mail address: (to be used for future annual report notification)							
For fur	ther information concerning this matter	, piease cair:					
	. 6. 6. 1		V 301 1313				
Margar	ret S. Crowley Name of Person	at (<u>352</u>) 281-1313 Area Code & Daytime Telephone Number				
	84 '9' A 14		Causes Addresses				
	Mailing Address: Registration Section		Street Address: Registration Section				
	Division of Corporations		Division of Corporations				
	P.O. Box 6327		The Centre of Tallahassee				
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				
	·		Tallahassee, FL 32303				
	Enclosed is a check for the following	g amount:					
	□ \$25 Filing Fee						
	— · ·····æ · · · ·	- +	· · · · · · · · · · · · · · · · · · ·				

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. Na	ame of the limited liability company: Special Commun	ications, LLC		415-2021
2 (0)	3985 NW 30th Place	(b) P	и вох <u>152545 — З</u>	35 7490
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0) <u>-</u>	Mailing addre	ess of limited liability company: (V BE POST OFFICE BOX)
	Gainesville, FL 32606	<u>G</u>	ainesville, FL_32635	5
	January 4, 2021	15	1318058ÇÇ	
3.	Date of filing/registration in Florida	4.	Document	number
5. (a)	Margaret S. Crowley Registered Agent and Registered Office shown on the records of 4125 NW 19th PLace Registered Office Address (MUST BE FLORIDA STREET)		pt. of State:	20
(b)	Gainesville , FL Enter name of NEW Registered Agent and/or NEW Registered		<u>15</u> :	FILED 2021 APR 19 PM 12: 41 TALLARIASSEE, FLORIDA
	NEW Registered Office Address:			
	3985 NW 30th Place		<u>.</u>	
	Gainesville , FL	_32606		
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law accept School leading to member or authorized representative of a member	registered o ability comp of the limited limited liabi	ffice and the busing any, it is hereby co I liability company	ess office of the registered nfirmed that the change(s) or as otherwise provided in
Signa	ture of member or authorized representative of a member	<u></u>	Printed or ty	sped name of signee
I here provisi the obl to mer	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I b	ee to act in t performance d for in Cha hereby confi	this capacity. I fur e of my duties, and oter 605, F.S. Or. i rm that the limited	ther agree to comply with the I am familiar with and accept if this document is being filed liability company has been
Simon	an writing of this change. Cultured 5 Ciowley ire of Registered Agent			
SIGNATU	ue overefivieien vfeur			

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.

Gainesville, FL 32606 Gainesville, FL 32635 January 4, 2021 Date of filing/registration in Florida 4. Document number 5. (a) Margaret S. Crowley Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 4125 NW 19th PLace Registered Office Address MUST BE FLORIDA STREET ADDRESS)				
2. (a) 3085 NW 30th Place Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Gainesville, FL 32606 Gainesville, FL 32635 January 4, 2021 3. Date of filing/registration in Florida 5. (a) Margaret S. Crowley Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 4125 NW 19th PLace Registered Office Address MUST BE FLORIDA STREET ADDRESS)				
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January 4, 2021 3. Date of filing/registration in Florida 4, Document number 5. (a) Margaret S. Crowley Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 4125 NW 19th PLace Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
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Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
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<u> </u>	•			
NEW Registered Office Address:				
Marie Registered Critice Address.				
3985 NW 30th Place				
Gainesville				
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed the change of change are made, the Florida strent address of the registered office and the hydrony of the registered office and the hydrony of the registered of the project of the registered of the project of the registered of the hydrony of the registered of the project of the registered of the registered of the project of the registered of th				
change or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change of the registered of the reg				
was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise pro				
the articles of organization or the operating agreement of the limited liability company.				
Signature of a member or authorized representative of a member Printed or typed name of signee				
Signature of member or authorized representative of a member Printed or typed name of signee				
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complete performance of my duties, and I am familiar with the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has notified in writing of this change.	and accept			

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

Signature of Registered Agent