L06000002662

(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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2022 MAR 11 AH 9: 54 SECRETARY OF LID FALLAHASSEEL FOR THE

COVER LETTER

TO: Registration Section Division of Corporations	•
208 Holdings, LLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing
Please return all correspondence concerning this man	
Jonathan S. Gilbert, Esq.	
Name of Person	·
Gibbons Neuman	
Firm/Company	
3321 Henderson Blvd.	
Address	····
Tampa, FL 33609	
City/State and Zip Code	
Jgilbert@gibblaw.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, please	e call:
Beverly S. Eckhardt	(352) 540-7161
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
i antanassoo, i D 52517	Tallahassee, FL 32303
Enclosed is a check for the following amou	ent:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (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.

i. Na	me of the limited liability company:	<u> </u>		<u>.</u>		
	25179 Malvern Street		(b)	25179 Ma	lvern Street	
L. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	ν-,		Mailing address of limite	
	Brooksville, FL 34601	_		Brooksvill	le, FL 34601	
	January 5, 2006	_	ī	.06000002	662	
3.	Date of filing/registration in Florida	4.	-	-	Document number	
5. (a)	Cone, Thomas, EJR, ESQ				_	
	Registered Agent and Registered Office shown on the records of t Thomas Cone, EJR, ESQ	he Flor	rida	Dept. of Star	te:	
	Registered Office Address (MUST BE FLORIDA STREET A	IDDRE	:25		-	
	150A Whitaker Road					202 St
	Lutz , FL	33549	-76	11		2022 MAR SECRE I
(b)	Jonathan S. Gilbert, Esq.				_	- 585 - 585 - 585
` '	Enter name of NEW Registered Agent and/or NEW Registered	Office	ado	ren:		
	Gibbons Neuman					
	NEW Registered Office Address:					+
	3321 Henderson Blvd.				_	
	Tampa , FL	33609)		<u></u>	
change agent v was/we	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 are authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	regist bility f the l	ere coi imi	d office ar npany, it i ted liabili	nd the business office is hereby confirmed ty company or as oth	e of the registered that the change(s)
_	web Celliards	B	eve	rly S. Eckh		
l herei provisi the obl	ture of a member or authorized representative of a member by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have the proper and this change.	ee to d perfor i for it tereby	act ma n C , co	in this cap nce of my hapter 60. nfirm that	Printed or typed name pacity. I further agre duties, and I am fan 5, F.S. Or, if this do the limited liability	ee to comply with the
Signatu	of Registered Agent		• • •	- m +1 1	FIX 4844 A	

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