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(Requestor's Name)					
(Address)					
, ,					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Dusiness Entry Maine)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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> 2024 OCT -3 PM 3: 13 SECRETARY DESIGIE

TO

COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: LET'S B SAFE	nited Liability Company						
Name of Li	inted Elaumty Company						
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter	to the following:						
Brenda ZoFrea Name of Person							
Name of Person							
LETIS B SAFE, LLC							
Firm/Company							
6156 41st ST. EAST							
Address							
Bradenton, FL 3420	3						
City/State and Zip Code							
brenda e. Lets bs. Afe. C	COM						
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please of	call:						
Brenda Zofrea and	913, 800-350/						
Name of Person	Area Code & Daytime Telephone Number						
Mailing Address:	Street Address:						
Registration Section	Registration Section						
Division of Corporations	Division of Corporations						
P.O. Box 6327	T_{i} C_{i} A_{i} C_{i}						
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 8105						
	The Centre of Tallanassee 2415 N. Monroe Street, Suite 81000000000000000000000000000000000000						
Enclosed is a check for the following amoun	to Spirit Land						
\$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.

1.	Name of the limited liability company: $\bot \mathcal{E} \mathcal{T}$	S B SAI	E, LLC			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		TS B SAF C Mailing address of limited liab (Note: MAY BE POST OF	oility company:		
	6156 41st Street EAS	615	6 41st Stree	E EAST		
	BrADENTON, FL 3420	_ Br	ADENTON, FL	1 34203		
2	07/05/2007		0000699	115		
3.	Date of filing/registration in Florida		Document number			
5. ((a) Moriarty & Chiofalo, 1 Registered Agent and Registered Office shown on the record	of the Florida Dept. of Sta				
1001 3rd Avenue West; Suite 650 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	Braden 70m	1 <u>34205</u>	_ _			
a	Brenda Zofrea					
`	Enter name of NEW Registered Agent and/or NEW Regist	ed Office address:	_			
	6156 41st ST. EAS	_				
	NEW Registered Office Address:		_			
	Bradenton	34203	_			
chan agen was/ the a	e limited liability company is not organized under the age or changes are made, the Florida street address of a will be identical. Or, in the case of a Florida limite were authorized by an affirmative vote of the memberaticles of organization or the operating agreement of	ne registered office a liability company, it s of the limited liabil ne limited liability co	nd the business office of t is hereby confirmed that; ity company or as otherwi	the registered the offunge(s) ise provided in		
I he prov	tradure of a member or authorized representative of a member ereby accept the appointment as registered agent and visions of all statutes relative to the proper and compobligations of my position as registered agent as proverely reflect a change in the registered office addressing in writing of this change;	gree to act in this ca	κρς. Pacity - I further agreeman	comply with the		
Sign	ature of Registered Agent					
•	Division of Corporations • P.	. Box 6327● Tallah	assee, FL 32314			

FILING FEE: \$25.00

INHS18 (2/14)