## L08066099731

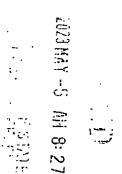
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJI Name	ECT: Zerega Consulting Services LLC of Corporation	
DOCU	UMENT NUMBER: 1.08000099731	
The en	nclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	matter to the following:
Jodie Z	Leroga .	
	of Contact Person	
Zerega	Consulting Services LLC	
-	Company	<del></del>
6823 A	Areca Blvd.	
Addres	SS	
Sarasot	ta. FL 34241	
City/St	tate and Zip Code	
	jzerega@zeregaconsulting.com	n
E-mai	l address: (to be used for future annual	report notification)
For fur	rther information concerning this matter, p	lease call:
Jodie Z	Zerega	at (404 \ \)660-3414
	Name of Contact Person	at (404 ) 660-3414  Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the I	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section

**Division of Corporations** The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	unge is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Sta ganized under the laws of the State of Flo	orida
<del></del>	er to change its registered office or restance.  The corporation: Zerega Consulting Se	gistered agent, or both, in the State of Flo. rvices LLC	rida.
2. The principal	office address: 6823 Areca Blvd., Sara	isota, FL 34241	
3. The mailing a	nddress (if different):		
		Document number:	
5. The name and		ed agent and registered office on file with	
	Chris Zerega		
	6823 Areca Blvd.		<del></del> :
	Sarasota, FL 34241		WAN EVE
6. The name and (if changed):		agent (if changed) and /or registered office	g. 9.
	Jodie Zerega		是 6
•	6823 Areca Blvd.		8: 28 8: 28
	PC	Hox NOT acceptable	
	Sarasota, FL 34241		
The street addre as changed will	ess of its registered office and the stable identical.	reet address of the business office of its r	egistered agent.
Such change wa authorized by the	* ~ ~ ~	pted by its board of directors or by an of notified in writing of the change.	ficer so
1/1/	Deliver	Jodie Zerega, Owner	
7	re of an officer or director	Printed or typed name and title	
l further agree i of my duties, an document is hei	the appointment as registered agen to comply with the provisions of all ad I am familiar with and accept the ing filed merely to reflect a change is sheen notified in writing of this cha	statutes relative to the proper and compl obligation of my position as registered a n the registered office address, I hereby	lete performance igent. Or, if this confirm that the
	Deliga	May 2, 2023	
Sign	mature of Registered Agent	Date	
If signing on be	chalf of an entity:		
T;	yped or Printed Name		

\* \* \* FILING FEE: \$35.00 \* \* \*