L090000 65261

(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
	17.3	- 74

Office Use Only



400440540354

10/07/24--01003--017 **113,75

2024 DEC -3 PH 2: 17
SECRETARY OF STATI

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.

ı) ,	500 Central Avenue, Sarasota, FL 34236	(b) San	ne
, .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	. (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		_	
	09/20/2024	L090	00065261
a)	Date of filing/registration in Florida Dennis Yoder	4.	Document number
,	Registered Agent and Registered Office shown on the records of the 500 Central Avenue, Sarasota, FL 34236	Florida Dept.	of State:
	Registered Office Address (MUST BE FLORIDA STREET AD 500 Central Avenue	ODRESS)	
	Sarasota , FL 34	4236	2021 DEC SECRET
o) .	Kevin Archer		E C S
	Enter name of NEW Registered Agent and/or NEW Registered O 500 Central Avenue, Sarasota, FL 34236	ffice address:	PM 2:
	NEW Registered Office Address:		
	500 Central Avenue		
	Sarasota , FL 34	1236	
ge t w we:	mited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liability reauthorized by an affirmative vote of the members of the organization or the operating agreement of the limited liability.	gistered offi lity compan the limited li nited liabilit	ice and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.
ノ(nan	ure of a member of authorized representative of a member	Dennis Yo	Printed or typed name of signee
reb isio bli ere	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe gations of my position as registered agent as provided fly reflect a change in the registered office address, I her in writing of this change	to act in thi erformance co or in Chapte reby confirm	is canacity. I further agree to comply with the