Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000400073 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

رب ا ر در

LLC REGISTERED AGENT CHANGE SMOKEY HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

NOV 2 9 2022

A. LUNT

Electronic Filing Menu Corporate Filing Menu

Help

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	une of the limited liability company: Smoke	ey Holdin	gs, LLC		
2.	(a)		(b) _			
		Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y:		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		01/13/2010	<u>L</u>	10000004789		
3.		Date of filing/registration in Florida	4.	Document number		
5.	(a)	Dworzanowski, Greg				
		Registered Agent and Registered Office shown on the recor	rds of the Florida De	ept. of State:		
		5422 Bay Center Dr.				
		Registered Office Address (MUST BE FLORIDA STR.		20		
		Suite 110			2022 NOV	
		TAMPA	_{.FL} 33609-3	3501	7 € € € € € € € € € € € € € € € € € € €	
		Desistant Assets Inc			14년 일본 28	
	(b)	Registered Agents Inc			- 2 200 m ■ 200 m	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>	stered Office addre	<u>ss</u> :	AM II: 2	
		7901 4th St N			27	
		NEW Registered Office Address:	····			
		STE 300				
		Ct. Data value	00700			
		St. Petersburg	_, _{FL} _33702			
the ag wa	ent v est w	imited liability company is not organized under that the control of the street address of a florida limit or authorized by an affirmative vote of the members of organization or the operating agreement or the control of the members of organization or the operating agreement or the operating	ess of the register ted liability compoers of the limite of the limited liab	red office and the business o pany, it is hereby confirmed d liability company or as oth	office of the registered that the change(s)	
\leq	<u> </u>	ture of a member or authorized representative of a member	- Kney	Printed or typed name	of signee	
I i pr the to	here ovisi e obl mer	by accept the appointment as registered agent and ons of all statutes relative to the proper and compigations of my position as registered agent as propely reflect a change in the registered office address in writing of this change.	plete performand wided for in Cha	this capacity. I further agree ce of my duties, and I am fan apter 605, F.S. Or, if this do	ee to comply with the niliar with and accept ocument is being filed	

- Assistant Secretary

Bill Havre

Signature of Registered Agent