## MO 000 131797

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

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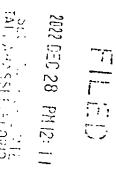
A. RIVERS



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DEC 27 2022



## **COVER LETTER**

TO:	Registration Section Division of Corporations		•	
	·		`	
SUBJ	ECT: LIGHTNING MARKETING C		.C Liability Company	
		i (i ziiii)		
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered Off	ice Change ai	nd fee(s) are submitted fo	r filing.
Please	e return all correspondence concerning th	is matter to th	ne following:	
John	Drabkowski			
	Name of Person		<del></del>	
LIGH	ITNING MARKETING GROUP, LL	.C		
-	Firm/Company			
1001	N Federal Highway SUITE 230			
	Address			
Halla	andale Beach, FL 33019			
	City/State and Zip Code			
john(	@lightningmarketinggroup.com			
	E-mail address: (to be used for future ann	ual report no	tification)	
For fu	orther information concerning this matter.	please call:		
John	Drabkowski	at (508_	361-5743	
	Name of Person		Area Code & Daytin	ne Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	   	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 3231	4
	Enclosed is a check for the following	amount:		
	■ \$25 Filing Fee		\$55 Filing Fee & Certific	ed Copy

## 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.

	LIGHTNING	MARKETI	NG GROUP, LI	LC	
	ame of the limited liability company:	1	001 N Endoral	Highway	
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b) <u>_</u>	(b) 1001 N Federal Highway  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  SUITE 230  Hallandale Beach, FL 33009		
	SUITE 230	S			
	Hallandale Beach, FL 33009	 			
	12/28/2010		L10000131797		
3.	Date of filing/registration in Florida	4.	Docume	nt number	
5 (0)	DRABKOWSKI, KATHERINE J				
5. (a)	Registered Agent and Registered Office shown on the records of 3535 S Ocean Dr.	the Florida De	pt. of State:		
	Registered Office Address (MUST BE FLORIDA STREET) Unit 805	<u>ADDRESS)</u>			
	Hollywood	_33019			
(b)	John Drabkowski  Enter name of NEW Registered Agent and/or NEW Registered	d Office addre	os:	F DEC	
	1001 N Federal Highway		_	28 F	
	NEW Registered Office Address:			PH P	
	SUITE 230		<u> </u>	1112: II	
	Hallandale Beach	L_33009		••	
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the number of a member or authorized representative of a member by accept the appointment as registered agent and regions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address.	of the register iability composite limited liability composite limited liability limited liability liabili	red office and the pany, it is hereby of liability company ility company.  Drabkowski  Printed or this connective of the liability connective	business office of the registered confirmed that the change(s) by or as otherwise provided in typed name of signee further caree to comply with the	

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

Signature of Registered Agent