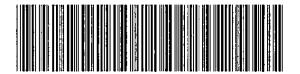
L12000108961

(Re	questor's Name)	. <u></u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
(Do	ocument Number)	
ec Copies	Certificates o	f Status
il Instructions to Filir	ng Officer:	

Office Use Only



100405303381

2023 MAR 24 PM 3: 31



ON 27 2023

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 591857 8401073

AUTHORIZATION :

COST LIMIT : \$/35.00

ORDER DATE: March 16, 2023

ORDER TIME : 9:0 AM

ORDER NO. : 591857-001

CUSTOMER NO: 8401073

CHANGE OF AGENT

NAME: AREJ HOLDINGS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: AREJ HOLDINGS, LLC	ership or Limited Liability Limited Partnership	
Name of Limited Partn	ership or Limited Liability Limited Partnership	
DOCUMENT NUMBER: L120001089	961	
The enclosed Statement of Change of F fee(s) are submitted for filing.	Registered Office and/or Registered Agent and	
Please return all correspondence conce	rning this matter to:	
Joel B. Cutter		
Contact Person		
Law Offices of Joel B. Cutter		
Firm/Company		
515 East Penn Street		
Address		
Long Beach, NY 11561		
City, State and Zip Code		
jbcoffices@gmail.com		
E-mail address: (to be used for future annu	ual report notification)	
For further information concerning this	matter, please call:	
Joel B. Cutler	at (516) 859-4995	
Name of Contact Person	Area Code and Daytime Telephone Number	
Enclosed is a \$35.00 check made payabl	e to the Florida Department of State.	
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
O. Box 6327	The Centre of Tallahassee	
allahassee, FL 32314	2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32303	

INHS04 (01/06)

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP () STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

L AREJ HOLDING	S, LLC			
N	ame of Limited Partnership or I	imited Liability Limited Partner	ship	
2 01/13/2015		3. L12000108961		
Date of filing/registration in Florida		Florida docu	Florida document number	
4. The name of the r Department of State:	egistered agent and the register	ed office address as shown on the	c records of the Florida	
	Julia N. Perry			
	N	lame	-	
	1524 Argyle Drive			
	Λο	ldress	•	
	Ft Myers, FL 33919			
	City, Sta	ate and Zip	•	
5. The name and Flo	rida street address of the new re	gistered agent and/or office:		
	Corporation Service Compa	any		
	N	ame		
	1201 Hays Street			
	Florida street address (P.O. Box not acceptable)		
	Tallahassee	FL 32301		
	City, Sta	te and Zip		
6. Such change(s) is/a	are effective when filed by the I	Florida Department of State.		
	3-5-2	3		
Signature of Canaral I	De-train	-		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

and I am familiar with an accept the obligations of my position as registered agent.

(Ilixin Wilard-) renson, AVP

Signature of Registered Agent