



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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LLC REGISTERED AGENT CHANGE FLBT ENTERPRISES, LLC

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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. N	ame of the limited liability company: FLBT ENTE					
• • •	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE ROX)		
	6224 NW 16TH STREET		6224 N	W 16TH STREET		
	MARGATE, FL 33063		MARGA	ATE, FL 33063		
	MARGATE, FL 33063		L120001	22900		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a))					
	Registered Agent and Registered Office shown on the records of FLORIDA STARTUP CO	the Flori	da Dept. of Stat	 tc:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			- -		
	2975 BEE RIDGE ROAD SUITE C3					
	SARASOTA , FI	3423	9	: 5		
(h)				(E)		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				- Att		
	UNITED STATES CORPORATION AGENTS, INC.			æ.		
	NEW Registered Office Address:					
	13302 WINDING OAK COURT, SUITE A					
	TAMPA ,, FI	. 3361	2	_		
the ch agent was/w the art	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lorger authorized by an affirmative vote of the members ticles of organization or the operating agreement of the authorized Florida Human authorized representative of a member	ws of the registry of the limited	ne State of Fl gistered office company, it i mited liabili I liability con ARBARA F	the and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany. HURLEY		
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee		
	chy accept the appointment as registered agent and agentions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by effect a change in the registered office address, I change the writing of this change. CHEYENNE MOSELEY, ASSISTANT SECRETAL STATES CORPORATION AGENTS, INC.	ree to a perfor ed for in hereby RY, UNIT	ct in this cap mance of my Chapter 60, confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been		