L130000 20640

(Requestor's Name)						
(Address)						
(Address)						
(City/Chata/Zia/Dhana 40						
(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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05/27/23--01031-002 **25.00





COVER LETTER

TO:	Registration Section Division of Corporations	•
SUB.	JECT: Plasma Energy	
	Na	me of Limited Liability Company
Dear S	Sir or Madam:	
The er	nclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.
Please	return all correspondence concerning th	nis matter to the following:
Sta	cy Y. Patrick	
	Name of Person	
Pla	sma Energy Group, LLC	
	Firm/Company	
176	533 Gunn Hwy, Suite 132	
	Address	
Ođ	essa, FL 33556	
	City/State and Zip Code	
syp	atrick@plasmaenergygroup.com	
i	E-mail address: (to be used for future and	nual report notification)
For fu	rther information concerning this matter	r, please call:
<u>Sta</u>	cy Y. Patrick	(727)244-8038
	Name of Person	Area Code & Daytime Telephone Number
	Mailing Address:	Street Address:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following	ramount:
	·	
	□\$25 Filing Fee	☐ \$55 Filing Fee & Certified 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.

2. (a) 12201 N.W. 30 th Place	(b) l) 17633 Gunn Hwy, Suite 132		
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability com <u>Sinow:MAYBEPOSTOFFICEBO</u>		
Miami, Florida, 33167		Odessa, FL 33556		
02/08/2013		L13000020640		
3. Date of filing/registration in Florida	4.	Document number		
5. (<u>a)</u> Miryam Barragan				
Registered Agent and Registered Office shown on the records of the	he Florida De	Dept. of State:		
15846 SW 16 Court				
Registered Office Address (MUST BE FLORIDA STREET)	DDRESS)			
Pembroke Pines, FL 33027		#CE: 1022		
		<u>₹</u> } ₹ ७	n	
Stacy Y. Patrick		PIL EL		
(b)		Pg ⊋ N	п	
Enter name of NEW Registered Agent and/or NEW Registered	Office addre			
17633 Gunn Hwy, Suite 132				
NEW Registereq Office Address:				
Odessa, FL 33556				
If the limited liability company is not organized under the law change or changes are made, the Florida street address of the ragent will be identical. Or, in the case of a Florida limited lial was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the least up and the company of the least up to the	s of the Sta registered of hility comp the limited imited liab	state of Florida, it is hereby confirmed that a I office and the business office of the regist npany, it is hereby confirmed that the char ted liability company or as otherwise provi	tered nge(s)	
Managing Member		Deinstal as to = 1 mm. of them		
Signature of a member or authorized representative of a member		Printed or typed name of signee		
I hereby accept the appointment as registered agent and agrowisions of all statutes relative to the proper and complete whe obligations of my position as registered agent as provide merely reflect a change in the registered agent address. I hereby writing of this change	ee to act in Performanc d for in Cl v confirm th	in this capacity. I further agree to comply nce of my duties, and I am familiar with a Chapter 605, F.S. Or, if this document is that the limited liability company has been i	with the nd acce being fi notified	

Division of Corporations PO Box 6327 Tallahassee, FL 32314

Signature of Registered Agent