

(Re	questor's Name)	=
(Ad	dress)	
(Ad	dress)	
·	•	
<u> </u>	y/State/Zip/Phone	- 4 0
(Cit	yrotaterzipirmone	= #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
000	Siness Chity Hai	110)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Charles landers to a	Filing Officer	
Special Instructions to	Filing Officer.	





09/06/22--01021--030 **35.00



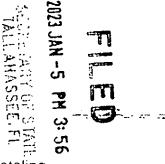




December 10, 2022

ROSANNE MINNET 223 WEST PROSPECT ROAD OAKLAND PARK, FL 33309

SUBJECT: EMB 221, LLC Ref. Number: L13000052820



We have received your document for EMB 221, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 922A00027474

Described places and a place of the place of

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: EMB 26 Name of Li	Mited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Cha	nge and fec(s) are submitted for filing.	
Please return all correspondence concerning this matte		
ROSEANN MINK	23 JAN - 5 TALLAHAS	
EMB 221, LLC	SEE STATE OF THE SEE STATE OF THE SEE STATE OF THE SEE STATE OF THE SEE SEE SEE SEE SEE SEE SEE SEE SEE S	
Firm/Company 223 West Pre Address	SPECT KOAD	
DAK LAND Park, City/State and Zip Code	FL 33309	
ROSEANNAMINNET C GI	nA/L.COM ort notification)	
For further information concerning this matter, please	call:	
Roseann Minnet at (954, Sol. 6747 Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount	nt:	
□ \$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.

Name of the limited liability company	EMB 22	1, LLC	
Principal office address of limited l		Som-Q Mailing address of limited li (Note: MAY BE POST O	
3	3309		
3. Date of filing/registration	<u> </u>	L/3000052	820
		Document number	
5. (a) Amy T Ga Registered Agent and Registered Office sh 3020 NE Registered Office Address (MUST BE FORT LAUDIU (b) CHARLES L. Enter name of NEW Registered Agent an 2000 South Da NEW Registered Office Address:	FLORIDA STREET ADDRESSI A LORIDA STREET ADDRESSI FL. 333 CURTIS ad/or NEW Registered Office address	SECULIARY OF TALLAHASSE	[F]
Pompano Bel	ach .FL 3306	<u> </u>	
If the limited liability company is not orgathange or changes are made, the Florida stagent will be identical. Or, in the case of a was/were authorized by an affirmative vote the articles of organization or the operating	treet address of the registered of a Florida limited liability compa e of the members of the limited	fice and the business office of my, it is hereby confirmed tha liability company or as othery	t the registered t the change(s) wise provided in
Signature of a member or authorized representation of the engineering of the appointment as registed provisions of all statutes relative to the protine obligations of my position as registered to merely reflect a change in the registered notified in writing of this change.	and the state of t	hie canacity. I further caree to	o comply with the

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

Signature of Registered Agent