LIH 000029301

(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:

Office Use Only



300390064963

05/27/22--01026--009 **25.00

SEP 2 0 2022 S. PRATHER

COVER LETTER

Division of Corporations	
Global Expat Advisors LLC SUBJECT:	
	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
Cynthia Davies	
Name of Person	
CINDY'S FLORIDA LLC	
Firm/Company	<u> </u>
8051 N. Tamiami Trail Suite E6	
Address	
Sarasota FL 34243	
City/State and Zip Code	
cindy@cindysfloridalle.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please c	call:
Cynthia Davies 7 at (27 300-0042
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	Street Address: Registration Section Division of Corporations The Centre of Talfahassee 2415 N. Monroe Street, Suite 810 Talfahassee, FL 32303
Enclosed is a check for the following amount	t:
■ \$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)	8051 N. Tamiami Trail STE E6	(b) 8051 ?	N. Tamiami Trail STE E6	
()	Principal office address of fimited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Sarasota, Florida, 34243	Saraso	ta. Florida, 34243	
	02/20/2014	L140000	029301	
3.5. (a)	Date of filing/registration in Florida HAMILTON, JOHN	4.	Document number	
, ,	Registered Agent and Registered Office shown on the records of t 1680 MICHIGAN AVE STE 700	the Florida Dept. of	State:	
	Registered Office Address (MUST BE FLORIDA STREET A	(ADDRESS)		
	MIAMI BEACH . FL	33139		
(b)	CINDY'S FLORIDA LLC		ALLA HARASSE	2022
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:		7. JUN 27
	8051 N. Tamiami Trail		(A)	27
	NEW Registered Office Address:		—— : ۲۰۰۰ ۲۰۰۰ - ا	
	Suite E6		ORI	?>
	Sarasota . FL	34243		22
agent v was/we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	registered office bility company, f the limited liab	and the business office of the registered it is hereby confirmed that the change(s) fility company or as otherwise provided in	
_Cur	uthia Davies	Cynthia Dav	ies, Manager	
Signat	ure of a member or authorized representative of a member		Printed or typed name of signee	
provision the oblication to mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I ha I in writing of this change.	sertormance at r	ny duties, and Lom familiar with and acco	ont

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

Cynthia Davies
Signature of Registered Agent