L14000045276

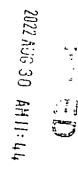
(Requestor's Name)				
(Address)				
(Ac	ddress)	-		
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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SEP 1 2 2021 LALBRITTON SPECIAL INSTRUCTIONS:

PLEASE RETURN:

PLEASE CALL (800)533-7272 ATTN: TO CONFIRM FILING RESULTS

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET (800)533-7272

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:CASA_PE	LICANOS L.L	. C .
2. (a)		(b)	
`	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	4436 COASTAL HWY		603 Washington St
	ST AUGUSTINE, FL 32082		Santa Cruz, CA 95060
			
	03/17/2014		L14000045276
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
• •	Registered Agent and Registered Office shown on the records o	f the Florida Dept. of S	State:
	EVANS, KELLY		
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS)	 -
	4436 COASTAL HWY		20
	ST AUGUSTINE ,F	L_32082	2022 AUG
	,		- 30 - 30
(b)	Esta Approx D		·
	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	
	Rocket Lawyer Corporate Services LLC		
	NEW Registered Office Address:		- F
	155 Office Plaza Drive, 1st Floor		
	Tallahassee	32301	
	, FI	32301	·
nange igent w vas/we he artic	mited liability company is not organized under the lay or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liar eauthorized by an affirmative vote of the members of the organization or the operating agreement of the	registered office a ability company, it of the limited liabil limited liability co	and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in ompany.
Signan	ire of a member or authorized representative of a member		Printed or typed name of signee
l hereb provisió he obli o merei otified	y accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, 1 h in writing of this change.	ee to act in this ca performance of my I for in Chapter 60 tereby confirm tha	pacity. I further agree to comply with the adules, and I am familiar with and accept 15. F.S. Or, if this document is being filed the limited liability company has been
Signature	of Registered Agent		