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To:

Division of Corporations

To: 18506176383

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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## LLC REGISTERED AGENT CHANGE **BENWEST STRATEGIST LLC**

Certificate of Status	0
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ILIN 2 9 2023

Name of the limited liability company: BENWEST STRATEGIST LLC

## 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)		(b) _	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	05/09/2014	L	14000076043
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	C T CORPORATION SYSTEM		
	Registered Agent and Registered Office shown on the records of t	pt. of State:	
	1200 SOUTH PINE ISLAND ROAD		2023
	Registered Office Address (MUST BE FLORIDA STREET A		
	PLANTATION , FL	33324	P P
(b)	Newborns Besime and Assessed C		22 F 28
	Enter name of NEW Registered Agent and/or NEW Registered	Office addre	<u>ss</u> : — . <u>I</u> K
	7901 4th St N		
	NEW Registered Office Address:	•	<del></del>
	STE 300		
	St. Petersburg , FL	33702	·····
the chagent was/w	limited liability company is not organized under the lavange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liatere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the register ability comp of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
1	at Smith	Nat S	
_	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob- to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I had an writing of this change.	ree to act in performand d for in Cho hereby conf	this capacity. I further agree to comply with the see of my duties, and I am familiar with and accept ipter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
Signati	Taylor Newman - Assistant Secretary	1	