

214 000 176586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

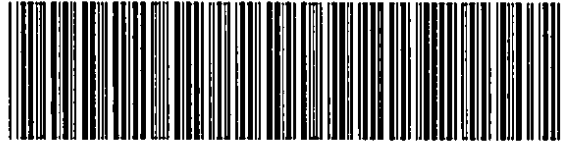
(Business Entity Name)

(Document Number)

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

MAR 30 2020

T. L. FIELDS

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cannolis Beer Smoke Shop LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Irina Sorishen

Name of Person

Irina Sorishen CPA PC

Firm/Company

101 E PA Blvd

Address

Feasterville, PA 19053

City/State and Zip Code

snatcha@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Irina Sorishen

Name of Person

at (215) 942 2980

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:

☐ \$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.

1. Name of the limited liability company: Connoisseur Smoke Shop LLC
2. (a) 1300 N University Dr (b) 1300 N University Dr  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)  
Pembroke Pines, FL 33024 Pembroke Pines, FL 33024

3. 12/09/2014 4. L14000176886  
Date of filing/registration in Florida Document number

5. (a) Agents & Corporations Inc  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
300 Fifth Ave South Suite 101-330  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

- (b) Naples, FL 34012  
Anna Lubavitch  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

1300 N University Dr  
Pembroke Pines, FL 33024

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

X  
Signature of a member or authorized representative of a member

Anna Lubavitch  
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

X  
Signature of Registered Agent

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