Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000278259 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE GIOTTO STUDIOS LLC.

Certificate of Status	U
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

MIG 1 0 2023

K. Brumbley

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. 8	Same of the limited liability company: Giotto Studios t	LLC.	
2. (a)	(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of fimited liability company: (Note: MAY BE POST OFFICE BOX)
	11/24/2014		000186147
3.	Date of filing/registration in Florida	4.	Document number
5. (a			
	Registered Agent and Registered Office shown on the records	of the Florida Dep	t, of State,
	2530 CHRUS TOWER BLVD #14311		<u>.</u>
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
	CLERMONT I	FL_34711	
ιb	Northwest Registered Agent LLC		2023
	Enter name of NEW Registered Agent and/or NEW Register	red Office address	
	7901 4th St N		APPRO AND FILE PALL AND 10
NEW Registered Office Address:			P# P#
	STE 300		Page 1.5.
	St. Petersburg	33702 FL	32
the chagent was/v the ar	Iimited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the formula of the for	of the registere liability compa s of the limited	ed office and the business office of the registered any, it is hereby confirmed that the change(s) hability company or as otherwise provided in lity company.
	ature of a member or authorized representative of a member		Printed or typed name of signee
provi. the ol to mc	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple oligations of my position as registered agent as provide rely reflect a change in the registered office address, yed in writing of this change. Taylor Newman - Assistant	tie performance ded for in Chaj I hereby confir	e of my duties, and I am familiar with and accept vier 605, F.SOr, if this document is being filed

Signature of Registered Agent