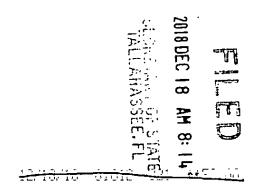
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(Requestor's Name)	<u> </u>			
(Address)				
(Address)				
(autrees)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(0.11)				
(Business Entity Name	e)			
(Document Number)				
Certified Copies Certificates of	of Status			
-				
Special Instructions to Filing Officer:				

Office Use Only



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12/18/18--01012--021 **25.33

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	Orezzoli Tax Service LLC				
170130	Name of Limited Liability Company				
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Off	rice Change a	nd fee(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to t	he following:		
Raul	Orezzoli				
	Name of Person				
Orez	zoli Tax Service LLC				
	Firm/Company				
7491	N. Federal Hwy Ste C5-187				
	Address				
Boca	Raton, FL 33487				
	City/State and Zip Code				
rorez	zoli@gmail.com				
<u>F</u>	-mail address: (to be used for future ann	nual report no	otification)		
For fu	rther information concerning this matter	, please cali:			
Raul	Orezzoli	561	212-6085		
	Name of Person		Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS:		MAILING ADDRESS:		
	Registration Section		Registration Section		
	Division of Corporations		Division of Corporations		
	Clifton Building	P.O. Box 6327			
	2661 Executive Center Circle Tallahassee, Florida 32301	•	Tallahassee, Florida 32314		
	Enclosed is a check for the following	; amount:			
	☑ \$25 Filing Fee	ū	\$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.

I. Na	me of the limited liability company: Orezzoli Tax	Service LLC	
2. (a)	7491 N Federal Hwy	(b) 7491	N Federal Hwy
2. (11)	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)
	Suite C5-187	Suite (C5-187
	Boca Raton, FL 33487	Boca	Raton, FL 33487
	12/30/2014	L14001	96180
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	United States Corporation Agents Inc		
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of S	State:
	13303 Winding Oak Court A		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	2018 DEC 1
	Tampa , FI	33612	<u> </u>
(b)	Raul Orezzoli		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	— 89 9 FRATE
	7491 N Federal Hwy		
	NEW Registered Office Address:		
	Suite C5-187		
	Boca Raton . FI	33487	
the cha agent v was/wo the arri Signat I herel provisi the obli to mere	imited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited librate authorized by an affirmative vote of the members of cles of organization or the operating agreement of the cure of a member brouthorized representative of a member of the appointment as registered agent and against of all statutes relative to the proper and complete igutions of my position as registered agent as provided by reflect a change in the registered office address, I lin writing of this change.	f the registered off lability company, is of the limited liability of limited liability of Raul Orezz	fice and the business office of the registered it is hereby confirmed that the change(s) dity company or as otherwise provided in company. Printed or typed name of signce anacity. I further agree to comply with the
6 W			
Signatu	re of Registered Agent		