

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

Office Use Only



000361958810

03/16/21--01022--020 **25.00

PILED
2021 HAR 16 AM 10: 43
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations								
Rollin' Deep Rental Property LLC SUBJECT:								
Name of Limited Liability Company								
Dear Sir or Madam:								
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.							
Please return all correspondence concerning this matt	er to the following:							
Daniel Husted								
Name of Person								
Firm/Company								
1969 SW. Panther Trace								
Address								
Stuart, FL 34997								
City/State and Zip Code								
dshusted@hotmail.com								
E-mail address: (to be used for future annual rep	ort notification)							
For further information concerning this matter, please	call:							
Daniel Husted at (772 233-9680							
Name of Person	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 amoun	t:							
\$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. N	ame of the limited liability company:	ntal Pr	ope	rty LLC					
2. (a)	1969 SW. Panther Trace		1969 SW. Panther Trace						
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compa (Note: MAY BE POST OFFICE BO)						
	Stuart, FL 34997	_		Stuart, FL					
	08/24/2015	_	L	.15000145	5639				
3.	Date of filing/registration in Florida	4.	-		Document nui	mber			
5. (a)	Jeffrey C Pepin								
()	Registered Agent and Registered Office shown on the records of to 3418 Poinsettia Ave	he Flor	rida l	Dept. of Stat	e:				
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)				2021 HAR SECRETA TALL AHA			
	West Palm Beach , FL	33407	7		-	HASS	AR 16	11	
(b)	Daniel Husted								
	Enter name of NEW Registered Agent and/or NEW Registered	Office	addı	ess:	_	AM 10: 143 OF STATE E. FLORIDA			
	1969 SW. Panther Trace					401 31	င်ာ		
	NEW Registered Office Address:								
	Stuart , FL	34997			-				
change agent v was/we	mited liability company is not organized under the laws or changes are made, the foreign street address of the revill be identical. Or, in the case of a Florida limited liab are authorized by an afternative vote of the members of cles of organization of the prevating agreement of the li	egiste pility (the li	red com	office and pany, it is	d the business of thereby confirm y company or a	office of the			
	// //	Da	iniel	Husted					
	ure of a member or authorized representative of a member			_	Printed or typed r	name of signe	:		
I heret provision the oblit to mere protified	by accept the appointment by registered agent and agree ons of all statutes relative followings and complete per gations of my position as registered agent as provided if the reflect a change in the registered office address, I he is writing of this change.	e to ac erforn for in reby c	et in nanc Che conf	this capa ce of my d apter 605, irm that ti	icity. I further i luties, and I am F.S. Or, if thi he limited liabi	agree to coi i familiar w s document ility compan	mply w ith and is bein ly has i	ith the accept g filed been	
Signatur	e of Registered Agent								