LIC 000127789

(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:							





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12/22/22--01008--023 **900.00



A. RIVERS



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.

l. Na	ame of the limited liability company: FENCE OUTLE	T DAY	TON	A, LLC			
2. (a)	1725 S NOVA RD, BLDG N		(b)	9671 S. C	ORANGE BLOS	SSOM TRAIL	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		` '		Mailing address of	of limited liability comp BE POST OFFICE BO	
	SOUTH DAYTONA, FL 32119		ORLANDO, FL 32837				
	07/12/2016		I.	16000127			
3.	Date of filing/registration in Florida	4.	_		Document nu	ımber	
5. (a)	ALTON L. LIGHTSEY	_ <u>_</u> _					
(,	Registered Agent and Registered Office shown on the records of	f the Flor	rida I	Dept. of Sta	ite;		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	:S <u>S)</u>		<u> </u>		
	2105 N. PARK AVE.						
	WINTER PARK F	L32789)		<u> </u>		
(b)						7.5	
(0)	Enter name of NEW Registered Agent and/or NEW Registered Offi			ress:	 -	22 DE	Ti
	222 W COMSTOCK AVENUE	_				2022 DEC 22 SECRETAR TALLAHASS	T
	NEW Registered Office Address:				" ∺~ r		
	SUITE 200					AM S	
				-	_	유로	
	WINTER PARK, F	L)			15 th	
change agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	aws of the regist liability of the l	he S erec con limi	l office ar npany, it ted liabili	nd the business is hereby confi ity company or	s office of the regis irmed that the chan	tered ge(s)
// M				ON L. LIC			
Signature of a member or authorized representative of a member			Printed or typed name of signee				
provis the ob to mei	thy accept the appointment as registered agent and as tions of all statutes relative to the proper and complet digations of my position as registered agent as provid rely reflect a change in the registered office address, in a in writing of this change.	gree to d e perfor led for it I hereby	act i rma n Ci r coi	n this cap nce of my hapter 60 nfirm that	pacity. I furthe duties, and I o 5, F.S. Or, if t t the limited lia	er agree to comply am familiar with an this document is be ability company has	with the ad accept ing filed a been
Signat	ure of Registered Agent						
_							