

46 000163035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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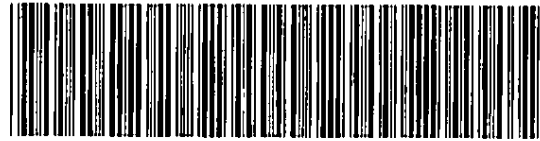
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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JAN 15 2020

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hand 6 ventures of the Palm beaches 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:

Matthew Goodrich

Name of Person

Hand 6 ventures of the Palm beaches LLC

Firm/Company

6743 west Indiantown Rd Suite 31

Address

Jupiter FL 33458

City/State and Zip Code

foreverhomesales@gmail.com

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

For further information concerning this matter, please call:

Matthew Goodrich

Name of Person

at (961) 951-3392

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: Hand Ventures of the Palm Beaches LLC

2. (a) 6743 West Indiantown Rd

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Suite 31, Jupiter, FL 33458

(b) 6743 West Indiantown Rd

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

Suite 31, Jupiter, FL 33458

3. 8/30/2016
Date of filing/registration in Florida

4. L16000163035
Document number

5. (a) Matthew Goodrich

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

10945 N military trail PBE FL

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Palm beach gardens, FL 33412

(b) Yamila Garcia-Diaz

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

6743 West Indiantown Rd suite 31,

NEW Registered Office Address:

Jupiter, FL 33458

Jupiter, FL 33458

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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.

[Signature]
Signature of a member or authorized representative of a member

Matthew Goodrich
Printed or typed name of signer

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.

[Signature]
Signature of Registered Agent