L17000008291

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2021 OCT -1 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 25 2021
A RAMSEY

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 11, 2021

CHRISTINA E. OPEL
5950 PELICAN BAY PLAZA S
STE. 803
GULFPORT, FL 33707

SUBJECT: AMMAJI, LLC
Ref. Number: L17000008291

We have received your document for AMMAJI, LLC and your check(s) totaling $55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist III

Letter Number: 221A00024665

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 AMMAJI, LLC

2. (a) 5950 PELICAN BAY PLZ, S. STE 803 GULFPORT, FL 33707
Principal office address of limited liability company
(Note: MUST BE STREET ADDRESS)

(b) SAME
Mailing address of limited liability company
(Note: MAY BE POST OFFICE BOX)

3. 01 JANUARY 2017
Date of filing/registration in Florida

4. L17000008291
Document number

5. (a) resigned
Registered Agent and Registered Office shown on the record of the Florida Dep...

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

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SECRETARY OF STATE
TALLAHASSEE, FL

Gregory S. Uchimura, CPA
NEW Registered Agent and or NEW Registered Office address

615 9th St. N.
NEW ...

St. Petersburg, FL 33701

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.

Christina E Opel
Signature of a member or authorized representative of a member

CHRISTINA E OPEL
Printed or typed name of signee

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.

Gregg S. Uchimura, CPA
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: $25.00