L17000024445

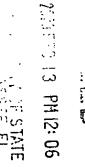
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PICK-UP	MAIT	MAIL		
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Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Children's Academy Name of Lim	Fishhauk
Name of Lim	ited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Baldum Sterling Name of Person	
Children's Academy Fishha	1 K
10560 Browning Road	
Litt. A Florida 33547 City/State and Zip Code	
E-mail address: (to be bled for future annual repor	j- t notification)
For further information concerning this matter, please ca	ill:
Baldwin Starling at (813) 966-5453 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 FEB 13 2023
Enclosed is a check for the following amount:	
S25 Filing Fee	□ \$55 Filing Fee & Certified Copy
INDEC 18 - 24 4	į.



January 11, 2023

BALDWIN STERLING 506 LIMONA ROAD BRANDON, FL 33510

SUBJECT: CHILDREN'S ACADEMY FISHHAWK LLC

Ref. Number: L17000024445

We have received your document for CHILDREN'S ACADEMY FISHHAWK LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 923A00000776

Neysa Culligan Regulatory Specialist III

www.sunbiz.org

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.

	506 LINOVA Road Brand Principal office address of limited liabilit (Note: MUST BE STREET ADD.	y company:	<u> </u>	Mailing address of lin (Note: MAY BE P	nited liability com	npany:
	$\frac{1/3i/2P/7}{Date of filing/registration in Flo$	orida	<u>Li70</u>	000 2444 Document number	<u>5</u>	
(a)	Registered Agent and Registered Office shown o					
(b)	Registered Office Address (MUST BE FLOR 1026 Tracey An Saffiner Baldwin Starling Enter name of NEW Registered Agent and/do N 10560 Browning NEW Registered Office Address:	S N COOP , FL EW Registered O	33584		20ZJA S TO THE STATE	1.5 PH 12: 06
	Lithia	, FL	33547	_		
ange ent v is/we	imited liability company is not organized to changes are made, the Florida street a will be identical. Or, in the case of a Florere authorized by an affirmative vote of the operating agrees.	iddress of the re ida limited liabi ne members of t	gistered office a lity company, it he limited liabili	nd the business offi is hereby confirme ty company or as o	ice of the regis d that the chan	stered nge(s)
	ture of a member or authorized representative of a		BALL	Printed or typed pan	RUNG	-

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 of Registered Agent