

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000446376 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

## LLC REGISTERED AGENT CHANGE **ZUDY OFFICE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

## 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: ZUDY OF	-FICE	LLC		
2. (a)	7901 4th St N	(b)	РО ВО	X 128	
2. (11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ` '		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	STE 300				
	St. Petersburg FL 33702		SOUTH H	HARWICH MA 02661	
	02/22/17	L170000		42159	
3.	Date of filing/registration in Florida	4.		Document number	
5 ()	CORPORATION SERVICE COMPANY				
5. (a)	Registered Agent and Registered Office shown on the records of the	he Florida l	Dept. of State:		
	1201 HAYES STREET				
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)			
				81-0	
	TALAHASSEE , FL	32301		2021 D	
463	Registered Agents Inc.			FILED 2021 DEC -7 P 7ALI AHASSEE	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	PH SEELE	
	7901 4th St N			1 2: <b>40</b> 5 TATE FLORID	
	NEW Registered Office Address:				
	STE 300				
	St. Petersburg	33702			
the chagent was/w the art Signal I here provise the obto men	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia tere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the attraction of a member or authorized representative of a member or poly accept the appointment as registered agent and agracions of all statutes relative to the proper and complete digations of my position as registered agent as provided the proper in the registered office address, I have discovered agent as provided the proper in the registered office address, I have discovered this change.	the regist bility cor f the limi limited li Riley ee to act performa I for in C	ered office npany, it is ted liability com y Park in this capa nce of my a hanter 605.	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  Printed or typed name of signee acity. I further agree to comply with the futies, and I am familiar with and accept F.S. Or, if this document is being filed	

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

- Assistant Secretary

Bill Havre

Signature of Registered Agent