To: 18506176383

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.

(((H24000404166 3)))



H240004041663ABC

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 : (813)436-5206

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

⊋Email Address:\_

## LLC REGISTERED AGENT CHANGE **URENU LLC**

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



2/9/2024 06:26:36 PST To 18506176383 Page: 2/2 Fax: 8134365206

## 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. Na	une of the limited liability company:					
2. (a)		(b)				
,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del></del>		failing address o ( <u>Note: MAY l</u>		ability company; FFICE BOX)
	7901 4th St N STE 300		7901 4th St	N STE 300		
	St. Petersburg, FL 33702	<u> </u>	St. Petersburg, FL 33702			
	03/27/17	L	1700006937	1		
3.	Date of filing/registration in Florida	4.		Document nu	ımber	
5. (a)	HENRY, KALEENA F					
<i>D.</i> ( <i>a</i> )	Registered Agent and Registered Office shown on the records of	the Florida 1	Dept. of State:	:		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)				
	2412 WINCHESTER BLVD					
	KISSIMMEE, FL	34743			: -	;
(b)	Northwest Registered Agent LLC					1 .
107	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress;			>
	7901 4th St N					
	NEW Registered Office Address:					<u>-</u>
	STE 300					***
	St. Petersburg , FL	33702				
the cha agent v was/we	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of the soft organization or the operating agreement of the	the regist ability cor of the limi	ered office opany, it is ed liability ibility com	and the busing hereby confined to the company or th	ness offic irmed that	e of the registered: the change(s)
Signat	ignature of a member or authorized representative of a member			Printed or type	d name of s	gnee
provisi the obl to mere	by accept the appointment as registered agent and aground ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is mitting of this change.	performa d for in Ci hereby coi	nce of my d	uties, and Lo	ım familie	ir with and accept
	Taylor Newman - Assistant Se	ecretary				