# L1700012745

	(Requestor's Name)								
	(Address)								
	(Address) (City/State/Zip/Phone #)								
-									
	(Business Entity Name) (Document Number)								
	Certified Copies Certificates of Status								
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### TO: Registration Section Division of Corporations

.

HOWLING BRANDS LLC

SUBJECT: \_\_\_\_\_

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:

Andrew Pierce

Name of Person

Cindy's Florida LLC

Firm/Company

8051 N. Tamiami Trail STE E6

Address

Sarasota, Florida, 34243

City/State and Zip Code

#### Florida@cloudpeaklaw.com

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

For further information concerning this matter, please call:

Andrew Pierce	727 300-0042	300-0042		
	at ()			
Name of Person	Area Code & Daytime Telephone	Number		
Mailing Address:	Street Address:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 8	310		
	Tallahassee, FL 32303			
Tallahassee, FL 32314		310		

## Enclosed is a check for the following amount:

S25 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 submuts 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:	HOWLING BRAN	IDS LLC	2			
2. (a)	8051 N. Tamiami Trail STE E6		 (b	8051 N. T	8051 N. Tamiami Trail STE E6		
2. (0)	Principal office address of limited lia ( <u>Note: MUST BE STREET A</u>		_ (0		-	nited liability company: POST OFFICE BOX)	
	Sarasota, Florida, 34243		_	Sarasota,	Florida, 34243		
	03/30/2017		_	L17000072	2745		
3.	Date of filing/registration in	Florida	4.		Document numb	ег	
5. (a)	Schimensky, William						
. (u)	Registered Agent and Registered Office show	- e:					
	4846 SUN CITY CENTER BLVD, #2						
	Registered Office Address <u>(MUST BE Fr</u>	-					
	SUN CITY CENTER	FL_	33573		-	2024	
(b)						د. مسر	
. ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				-		
	Cindy's Florida LLC					10.55	
	NEW Registered Office Address:				-	С. С	
	8051 N. Tamiami Trail STE E6				-		
	Sarasota	FL	34243		_		
change agent w was/we	imited liability company is not organize or changes are made, the Florida stree will be identical. Or, in the case of a F ere authorized by an affirmative vote c cles of organization or the operating a	et address of the re lorida limited liab of the members of	egistere fility co the lim mited li	d office and mpany, it is ited liability	d the business off hereby confirme y company or as c ipany.	ice of the registered d that the change(s)	
Signat	ure of a member of authorized representative	of a member			Printed or typed nar	ne of signee	
provisi the obli to mere	by accept the appointment as registere ons of all statutes relative to the prope ignitions of my position as registered a ly reflect a change in the registered of lin writing of this change.	er and complete pe	erforma	nce of my a	huties, ånd I am fe	miliar with and accept	

Signature of Registered Agent

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314