17000091176

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
FIVE:					
Office Use Only					



200298055442

05/02/17--01031--006 **25.00



MAY 0_A 2025

J SHIVERS

COVER LETTER

TO: Registration Section Division of Corporations	1					
SUBJECT: Amicus, LLC						
Name	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this	s matter to the following:					
Jordan Kircher						
Name of Person						
Amicus, LLC						
Firm/Company						
9150 South Dadeland Blvd., Suite 908						
Address						
Miami, Florida 33156						
City/State and Zip Code						
Jordan.Kircher@gmail.com						
E-mail address: (to be used for future annu	ual report notification)					
For further information concerning this matter,	please call:					
Jordan Kircher	305 903-0826					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:						
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					
INHS18 (2/14)						

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: Amicus, LLC		
2. (a)	9150 South Dadeland Blvd., Suite 908	(san	ne as Principal office address)
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Miami, Florida 33156		
	4/24/17	 L1700	00091176
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Registered Agents Inc.		
	Registered Agent and Registered Office shown on the records of 3030 N. Rocky Point Dr., STE 150A	the Florida Dept. of	f State:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	######################################
	Tampa , FL	33607	MAY WE TANK THE TANK
(b)			DASS CONTRACTOR OF THE PARTY OF
	Enter name of NEW Registered Agent and/or NEW Registered 25 9150 South Dadeland Blvd., Suite 908	M 7103	
	NEW Registered Office Address:		
	Miami , FL	33156	
the cha agent v was/w	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registered of ability company of the limited lia	office and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in company.
Signa	ature of a member or authorized representative of a member	 -	Printed or typed name of signee
provis the obi to mer	thy accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address. I d in writing of this change.	ree to act in this performance of d for in Chapter hereby confirm i	capacity. I further agree to comply with the my duties, and I am familiar with and accept : 605, F.S. Or, if this document is being filed that the limited liability company has been