17000145027

Office Use Only



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03/08/23--01010--019 **25.00

SECRETARY OF STATE

A. RIVERS MAY 1 5 2023

COVER LETTER

TO:		tration Section ion of Corporations										
SUBJ	ECT:	Innovate Real Estate Group LLC										
	Name of Limited Liability Company											
Dear S	Sir or M	adam:										
The er	nclosed	Registered Agent/Registered Offic	e Chan	ge and f	fee(s) are submitted for filing.							
Please	return	all correspondence concerning this	matter	to the f	ollowing:							
And	reas M	lerz										
		Name of Person										
		Firm/Company			_							
РО	Box 44	12			_							
		Address										
Cort	ez, FL	34215			_							
		City/State and Zip Code										
		as@icloud.com	_		_							
ì	E-mail a	iddress: (to be used for future annu	ial repo	rt notific	cation)							
For fu	rther in	formation concerning this matter.	please e	all:								
And	reas M	lerz	at (239) 233-9000							
		Name of Person			Area Code & Daytime Telephone Number							
	Regis Divis P.O.	ing Address: stration Section sion of Corporations Box 6327 hassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303							
	Enclo	osed is a check for the following:	amount	ı:								
∑ \$25 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 submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: Innovate Real	Estate	Group LLC	<u> </u>			
2.	(a)		(b)					
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ 、 ·	M	Tailing address of limite (Note: MAY BE POS	d liabil	ity com	pany:
		820 15th St N	_	PO Box 4	142			
		St. Petersburg, FL 33705	_	Cortez, F	L 34215			
		07/06/2017		L1700014	45027			
3.		Date of filing/registration in Florida	4.	Γ	Document number			
5.	(a)	Ron St. Clair						
٠.	()	Registered Agent and Registered Office shown on the records of the	ne Florida	Dept, of State:				
		615 Cape Coral Pkwy, Ste 104						
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)					
		Cape Coral . FL	33914					
	(b)	Andreas Merz			***	- S	2023 MAR	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	ress:	3	- CEC	<u> </u>	11	
		820 15th St N		; ;	TARY	78 -6		
		NEW Registered Office Address:			•	ALASSEE, FLORIDA	AM 8:	
						골듦	53	
		St. Petersburg .FL	33705					
ch. age wa the	ange ent we s/we arti-	mited liability company is not organized under the laws or changes are made, the Florida street address of the regill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability of a member or authorized representative of a member by accept the appointment as registered agent and agree	registered bility core the limited lia	d office and appany, it is lated liability ability comp	the business office hereby confirmed the company or as other bany. Andreas Merz Printed or typed name of the confirmed of typed name of the confirmed of typed name of the confirmed of the con	of the hat the erwise	e regis e chan e provi	tered ge(s) ded in
pro the to	ovisio Pobli merc	ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided iv reflect a change in the registered office address, I he in writing of this change.	erforma for in Ci reby coi	nce of my di hapter 605, ifirm that th	ities, and I am fami F.S. Or, if this doc e limited liability c	iliar w umen ompa	vith an t is be ny has	d accept ing filed been
Sig	gnatur	e of Registered Agent						