117000170368

Office Use Only



900375724699

10/28/21--01004--007 **25.00

2021 OCT 28 PM 3: 08

O S. A. C. C. S. NOV 1 8 2021

COVER LETTER

TO: Registration Section

Division of Corporations						
SUBJECT: Small World Solutions	FCT. Small World Solutions					
Name of I	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.					
Please return all correspondence concerning this mat	ter to the following:					
Arnold H Smalley						
Name of Person						
Small World Solutions						
Firm/Company						
1037 Truffles Court						
Address	 					
Apopka, FL 32712						
City/State and Zip Code						
SmallWorldSolutions2018@gmail.com	n					
E-mail address: (to be used for future annual re						
For further information concerning this matter, pleas	e call:					
Arnold Smalley	954 , 254-5503					
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 Tallahassec, 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.	Na	me of the limited liability company: Small Wor	rld	Solution	ns	
2		C/O Arnold Smalley	(b) C/O Arnold Smalley			
٠.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		2247 NW 170 Ave		1037 T	ruffles Ct	
		Pembroke Pines, FL 33028	_	Apopka,	FL 32712	
		08/09/17		L170001	170368	
3,		Date of filing/registration in Florida	4.		Document number	
5	(a)	Corporations Service Company				
٥.	(ω)	Registered Agent and Registered Office shown on the records of the	e Flori	da Dept, of State	::	
		1201 Hays Street				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
					LA LECT	
		Tallahassee ,FL 3	3230)1		FILED 2021 OCT 28 PH 3: 08
			.— .			
Tallahassee Fil 32301 (b) Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address:					PH	
Enter name of NEW Registered Agent and/or NEW Registered Office address:				in a	္က ယူ	
		7901 4th St N			المشي	08 07E
		NEW Registered Office Address:				
		STE 300				
					•	
		St. Petersburg , _{FL} 3	370)2		
the ago wa	cha ent w s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab tree authorized by an affirmative vote of the members of these of organization or the operating agreement of the limited liab	he reg vility the li mited	gistered office company, it is mited liability I liability com	and the business offices hereby confirmed that y company or as otherwipany.	te of the registered it the change(s)
_	/ X	ure of a member or authorized representative of a member	Ar	nold H Sma	alley III Printed or typed name of s	signee
I h pro the to i	verel ovisio obli nere ified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete paigations of my position as registered agent as provided judy reflect a change in the registered office address. I he is writing of this change. Bill Havre - Assistant	erfor for in reby	mance of my a Chapter 605 confirm that i	ucity. I further agree t	o comply with the
Sig	natui	re of Registered Agent				

-