1170000181524

(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:				
J DENIUS				
AUG - 7 2023				

Office Use Only



700409381627

08/05/23--01007--002 **25.00

THE TARY OF STAIRS

COVER LETTER

TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations		·
SUBJE	PROFFERFISH, LLC		
	Name of I	_imited	Liability Company
Dear Si	ir or Madam:		
The end	closed Registered Agent/Registered Office Ch	ange an	d fee(s) are submitted for filing.
Please	return all correspondence concerning this mat	ter to the	e following:
Heathe	er DePalma		
	Name of Person		
Proffer	fish, LLC		
	Firm/Company		
1002B	S. Church Ave., #10211		
	Address		
Tampa	a, FL 33629		
	City/State and Zip Code		
	er@profferfish.com		
E	E-mail address: (to be used for future annual re	port no	ification)
For fu	rther information concerning this matter, pleas	se call:	
Heathe	er DePalma at	813	404-0941
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amo	unt:	
	■ \$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.

Name of the limited liability company:	(b) Profferfish, L	Profferfish, LLC		
(a) Principal office address of limited liability (Note: MUST BE STREET ADD.	y company: Mai	ling address of limited liability company: Note: MAY BE POST OFFICE BOX)		
1002B S. Church Ave., #10211	1002B S. Ch	urch Ave., #10211		
Tampa, FL 33629	Tampa, FL 3	3629		
08/24/2017	L1700018152	4		
Date of filing/registration in Fl	orida 4. D	ocument number		
Florida Entrepreneur Law, P.A.				
(a) Registered Agent and Registered Office shown				
Registered Office Address (MUST BE FLO	•			
Fort Lauderdale	, FL	FILL SELECTARY 2023 JUN -5		
(b) Fresh Legal Perspective, PL				
Enter name of NEW Registered Agent and/or	Enter name of NEW Registered Agent and/or NEW Registered Office address:			
Keathel Chauncey, ESQ				
NEW Registered Office Address:				
6930 W Linebaugh Ave		,		
Tampa	, FL			
the limited liability company is not organized thange or changes are made, the Florida street agent will be identical. Or, in the case of a Florida street was/were authorized by an affirmative vote of the articles of organization or the operating agent will be identical. Or, in the case of a Florida was/were authorized by an affirmative vote of the articles of organization or the operating agent was a manufacture of a member or authorized representative of the registered and the registered of the schange of the change of the change of the change of the schange of the sc	raddress of the registered office and orida limited liability company, it is the members of the limited liability preement of the limited liability company Heather DePalm	hereby confirmed that the change(s) company or as otherwise provided in pany. a Printed or typed name of signee		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent