## 117000221420

(Requestor's Name)							
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PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status	_						
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## **COVER LETTER**

TO:	Registration Section Division of Corporations						
SUBJE	The PT Hustle, LLC						
COSE		Name of Limited Liability Company					
Dear Si	r or Madam:						
The enc	losed Registered Agent/Registered	Office Change	e and fee(s) are submitted for filing.				
Please r	eturn all correspondence concerning	g this matter to	o the following:				
Kevin A	Lonzo. Esquire		1				
	Name of Person	<del></del>					
Lonzo L	aw. PLLC						
<del></del>	Firm/Company		<del></del>				
136 Fou	rth Street North, Suite 243						
	Address		<del></del>				
St. Peter	rsburg, FL 33701						
•	City/State and Zip Coo	de	<del></del>				
-	glonzolaw.com						
E-	mail address: (to be used for future	annual report	notification)				
For furt	her information concerning this ma	tter, please cal	f:				
Kevin A	. Lonzo	727 at (	417-1166				
	Name of Person		Area Code & Daytime Telephone Number				
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
	Enclosed is a check for the follow	ving amount:	Tallahassee, FL 32303				
	■ \$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.

<ol> <li>N</li> <li>(a)</li> </ol>	ame of the limited liability company:		b)				
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	121 175 Terrace Drive East		121 175 Te	rrace Drive East			
	Redington Shores, FL 33708	_ <del>_</del>	Redington	Shores, FL 33708			
	10/25/2017		L170002214	20			
3.	Date of filing/registration in Florida	4.	<del></del>	Document number			
5. (a)	Republic Registered Agent, LLC			•			
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept. of State	:			
	Republic Registered Agent, LLC						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u></u>				
	1150 NW 72 Avenue Tower, Suite 455						
	Miami , F	L_33126					
(b)	Lonzo Law, PLLC						
Enter name of NEW Registered Agent and/or NEW Registered Office address:							
	Lonzo Law, PLLC						
	NEW Registered Office Address:	···					
	136 Fourth Street North, Suite 243						
	St. Petersburg	L 33701					
change agent was/w the art	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited laterer authorized by an affirmative vote of the members itcles of organization or the operating agreement of the	e register liability con of the lirule e limited	ed office and ompany, it is nited liability liability com	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.			
	Kevin A. Lonzo  Signature of a member or anthorized representative of a member			<u> </u>			
	•			Printed or typed name of signee			
provis the ob to mer	eby accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, the writing of this change.	gree to ac e perform ed for in hereby c	t in this capa ance of my d Chapter 605, onfirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been			

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

Signature of Registered Agent