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(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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COVER LETTER

TO:	Registration Section Division of Corporations		
	Kathy Escalera, LLC		
SUBJE	ability Company		
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered (Office Change and f	fee(s) are submitted for filing.
Please	return all correspondence concerning	this matter to the f	ollowing:
Kathy l	iscalera		
	Name of Person		
Cooper	Homes		
	Firm/Company		_
3415 W	Lake Mary Blvd #952949		
	Address	 .:	
LAKE	MARY, FL 32795		
	City/State and Zip Cod	le	
kathyes	scaleralle@gmail.com		
E	E-mail address: (to be used for future	annual report notifi	cation)
For fu	ther information concerning this mat	tter, please call:	
Kathy I	isealera	407	247-2328
	Name of Person	at (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 Tallahassee, FL 32303
	Enclosed is a check for the follow	ing amount:	
	■ \$25 Filing Fee	□ \$5	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.

L. Na	Kathy Escalera, lune of the limited liability company:	Kathy Escalera, LLC				
2. (a)	4026 Crawley Down Loop		3415 W LAKE MARY Blvd #952949 (b)			
- (47	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Sanford, FL 32773			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) RY, FL 32795		
	11/13/2017		L1700023402	55		
	Date of filing/registration in Florida Registered Agents, Inc.			Document number		
	Registered Agent and Registered Office shown on the records o	of the Flori	da Dept. of State	:		
	Registered Office Address 7901 4th St. N., Suite 300	r ADDRE	<u>55)</u>			
	St. Petersburg, F	33702 L		آب آب		
	Enter name of NEW Registered Agent and/or NEW Registere		 ,	22 22		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u> Kathy Escalera	ed Office a	<u>ddress</u> :	? <u>≅</u> ∹		
	NEW Registered Office Address: 3415 W LAKE MARY Blvd #952949			, <u>-</u>		
	Lake Mary	32795 L		_		
change agent v was/wo	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited level authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registe iability of the line limited	red office and company, it is nited liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.		
Signat	ture of a member or authorized representative of a member			Printed or typed name of signee		
provisi the obl to merc	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ily reflect a change in the registered office address. I kin writing of this change.	gree to ac e perforn ed for in hereby c	et in this capa nance of my d Chapter 605, confirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been		

Signature of Registered Agent