L17000242439

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COVER LETTER

Derby Cybersecurity LLC SUBJECT:			
	ame of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered O	office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
Sotirios Triantatillou			
Name of Person			
Derby Cybersecurity LLC			
Firm/Company			
1163 NE 3rd Ave			
Address			
Boca Raton Florida 33432			
City/State and Zip Code			
soto30300@protonmail.com			
E-mail address: (to be used for future a	nnual report notification)		
For further information concerning this matte	er, please call:		
Sotirios Triantafillou	561 617-6030 at ()		
Name of Person	Area Code & Daytime Telephone Num		
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 following	ng amount:		
\$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:	y LLC		
?	(a)	1163 NE 3rd Ave. Boca Raton, FL. 33432		1163 NE 3	ord Ave. Boca Raton, FL. 33432
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	-		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.		Date of filing/registration in Florida	4.	L17000242-	Document number
		UNITED STATES CORPORATION AGENTS, INC.			
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta 476 RIVERSIDE AVE. Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			- e: -
		JACKSONVILLE FL 3	2202		- 7Ã 28
	(b)	Sotirios Triantafillou			2023 NOV 27 PI
	` ,	Enter name of NEW Registered Agent and/or NEW Registered ()ffice ac	<u>ldress</u> :	V 27
		1163 NE 3rd Ave.			ma to M
		NEW Registered Office Address:			PH 4: 14 EFFLORIDA
		Boca Raton , FL	33432		_
ch ag wa	ange ent v is/w	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	egister oility co the lin	ed office an ompany, it i nited liabilit	d the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in
_		bre of authorized representative of a member	Soti	irios Triantaf	Illou Printed or typed name of signee
pr the to no	ovisi ner tifie	the of a number of authorized representative of a member who accept the appointment as registered agent and agresions of all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	e to ac erform for in (ereby c	t in this cap ance of my Chapter 602 onfirm that	acing I further agree to comply with the