## 11800018445

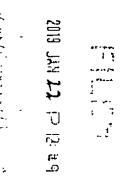
(Requestor's Name)						
(Address)						
(Address)						
(City/	State/Zip/Pho	ne #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificat	es of Status				
Special Instructions to Filing Officer:						

Office Use Only



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JAN 08 2023

T. LEMIEUX

## **COVER LETTER**

то:	Registration Section Division of Corporations					
SUBJI	Latitudes The Real Estate E	Latitudes The Real Estate Boutique, LLC				
5017		ne of Limited L	iability Company			
Dear S	ir or Madam:					
The er	closed Registered Agent/Registered Off	ice Change and	I fee(s) are submitted for filing.			
Please	return all correspondence concerning th	is matter to the	following:			
Olga	Glenn					
	Name of Person	<del></del>	<del></del>			
Latitu	ides The Real Estate Boutique					
	Firm/Company		<del></del> .			
1028	Kestrel Court					
	Address		<del></del>			
Brade	enton, FL 34208					
	City/State and Zip Code	· ·	<del></del>			
olga@	@latitudesreb.com					
<u>-</u>	E-mail address: (to be used for future and	nual report noti	fication)			
For fu	rther information concerning this matter	. please call:				
Olga	Glenn	941 at (	809-3216			
	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	R D P.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	□ s	55 Filing Fee & Certified Copy			
NHSI	8 (2/14)					



January 8, 2019

OLGA GLENN 1028 KESTREL CT BRADENTON, FL 34208

SUBJECT: LATITUDES. THE REAL ESTATE BOUTIQUE, LLC

Ref. Number: L18000018645

We have received your document for LATITUDES. THE REAL ESTATE BOUTIQUE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 519A00000548

RECEIVED

9 JAN 22 AM 11: 05

Hacked downants need with changes. Hack you

## 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	me of the limited liability company: Latitudes The	Real	Estate Bou	itique, LLC
2. (a)	1028 Kestrel Court	(1	o)	
4. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ ``		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	1028 Kestrel Court			
	Bradenton, FL 34208	***		
	01/22/2018		L1800001	18645
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	United State Corporation Agents, Inc			
). (a)	Registered Agent and Registered Office shown on the records of the	::		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	13302 Winding Oak Court A			_
	Tampa , FL	33612		-
(b)	Olga Glenn			2019
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office at	<u>ldress</u> :	
	NEW Registered Office Address:			T T
	1028 Kestrel Court			
	Bradenton , FL	3428	<u>-</u>	-
the cha agent v was/wo	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reg bility c f the lir	istered office ompany, it is nited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	·sal	Olá	ga Glenn	
-	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi he obl pomere	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete j igations of my position as fegistered agent as provided by reflect a chorge in the registered office address, I have	ee to ac perforn I for in nereby c	et in this cap nance of my Chapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been
ignatu	re of Regionard Agent			