## L18000020607

(Requestor's Name)							
(Address)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(D.: F N							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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Office Use Only



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SECRETARY OF STATE LAHASSEE, FLORITALLARACUSE BY

A. BUTLER JUN 20 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195								
REFERENCE : 753254 8336559								
AUTHORIZATION: Spulle le man								
COST LIMIT : \$ 25.00								
ORDER DATE : June 17, 2022								
ORDER TIME : 10:23 AM								
ORDER NO. : 753254-010								
CUSTOMER NO: 8336559								
CHANGE OF AGENT								
NAME: COLLECTING ARTS LLC								
THE THE COURSE THE PROPERTY OF								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON: Alexxis Weiland EXT#								

EXAMINER:

## 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.

١.	Na	ime of the limited liability company:COLLECTING A	RTS L	.LC	; 			
2. (	(a)	2550 Goodlette Rd N		(b) 410 Lone Star Dr				
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(~)	Mailing addr	ress of limited liabili IAY BE POST OFFI	- , -	
		Naples, FL 34103			Hideaway, TX 7577	'1 		
		01/24/2018	<del></del>	l	_18000020607			
3.		Date of filing/registration in Florida	4,		Documen	nt number		
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State Tennyson, Christine M Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				<i>છ</i> າ ⊅	<u>ي</u>	
		2550 Goodlette Rd N  Naples FL	34100	3		ECRETA TALLA	2000	
(	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company	Office a	add	ress:	OF ST	7 PH 1: 22	
		NEW Registered Office Address:						
		1201 Hays Street			<del></del>			
		Tallahassee FL_	32301					
cha age: was	nge nt w /we	mited liability company is not organized under the law or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of the leges of organization or the operating agreement of the leges of organization.	registe bility c f the li	rec on mit	l office and the busin pany, it is hereby co ted liability company	ness office of the onfirmed that the	registered change(s)	
/s/ Parker J. Collier			Pa	Parker J. Collier, Manager				
I he prov the to m noti	ereb visio obli vere fiea	ure of a member or authorized representative of a member by accept the appointment as registered agent and agreems of all statutes relative to the proper and complete progrations of my position as registered agent as provided by reflect a change in the registered office address. I have in writing of this change.  Green Registered Agent						