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	No. and and a Miles and A		
(re	equestor's Name)		
(Address)			
(Ac	ddress)	_	-
(Ci	ty/State/Zip/Phone	e #)	-
PICK-UP	☐ WAIT	MAIL	
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(De	ocument Number)	999999999	-
Certified Copies	Certificates	s of Status	-
Special Instructions to	Filing Officer:]
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Office Use Only



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COVER LETTER

Division of Corporations					
SUBJECT: Steven W. Name of Limit	elner LLC ited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:					
Steven Weiner Name of Person					
Firm/Company					
4302 Hollywood Blud #	108				
Holly wood Florida 3 City/State and Zip Code					
esteban 3922 & yakw. E-mail address: (to be used for future annual report	notification)				
For further information concerning this matter, please call:					
Steven Weiner 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 following amount:					
¥\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				

STÄTEMENT 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. N	ame of the limited liability company: Steven u	Jeine	~ U.C	
2. (a)	()	b)	Mailing address of limit	11.57
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limit (Note: MAY BE PO:	
	4302 Holly wood Blud. #108	4302	- Holluna	ood Blud # 10
1	Hollywood, Pl 33021	Holly	wood, Fl	
3.	7-12-21 Date of filing/registration in Florida 4.		/800004	18866
	< +0 10 1.			
5. (a)	Registered Agent and Registered Office shown on the records of the Florid	a Dept. of State	_ e:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS	<u> </u>	_	
	4302 Hollywood Blud. +	\$ 108	_	~ ?
		3302		
			ı	
(b)			_	通 6 . "
	Enter name of NEW Registered Agent and/or NEW Registered Office ac	<u>ldress</u> :		AN 8:24
	NEW Registered Office Address:		_	42
	4302 Hollywood Blud. #	108	_	
	Holly wood .FL 3	33021	-	
	limited liability company is not organized under the laws of the			
agent was/we	e or changes are made, the Florida street address of the register will be identical. Or, in the case of a Florida limited liability of ere authorized by an affirmative vote of the members of the lin- icles of organization or the operating agreement of the limited	ompany, it is nited liability	s hereby confirmed y company or as oth	that the change(s)
(THE STATE OF THE S	•	WEINER Printed or typed name	
Signa	iture of a member or authorized representative of a member		Printed or typed name	of signee
provisi the obi	by accept the appointment as registered agent and agree to actions of all statutes relative to the proper and complete perform ligations of my position as registered agent as provided for in (ely reflect a change in the registered office address. I hereby call in writing of this change.	t in this cape ance of my c Chapter 605 onfirm that c	acity. I further agre duties, and I am fan , F.S. Or, if this do the limited liability	e to comply with the niliar with and accept cument is being filed company has been

Signature of Kegistered Agent