## L18000059902

(Requestor's Name)					
(Address)					
(Addiess)					
(Address)					
(City/State/Zip/Phone #)					
( = -y, =					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Cadified Casina Cadificana at Chance					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





000439187880

11/08/24--01018--003 \*\*25.00



## COVER LETTER

TQ: Registration Section Division of Corporations					
SUBJECT: Mase Rodina LLC  Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
NANCY Stouall Name of Person					
NASE Rodina LLC Firm/Company					
2326 Pelican Bay Ct. Address					
Panama City Beach, FL 32408 City/State and Zip Code					
NISTOUA I @ CMail. Com  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Name of Person at (256) 527 - 0195  Name of Person Area Code & Daytime Telephone Number					
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303					
Enclosed is a check for the following amount:					
\$25 Filing Fee  \$25 Filing Fee & Certified Copy					
CK≠1010 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.

1. Na	me of the limited liability company:	odina	LLC
2. (a)	Principal office address of limited liability company:	_ (b)	Mailing address of limited liability company:
	( <u>Note: MUST BE STREET ADDRESS</u> )		(Note: MAY BE POST OFFICE BOX)
	2022011 7 2018		80000 59902
3.	MARCH 7, 2018  Date of filing/registration in Florida	4.	Document number
5. (a)	NANCY L STOUAII  Registered Agent and Registered Office shown on the records of the Stoua Front Brach Road Registered Office Address MUST BE FLORIDA STREETA  1502  Panama City Brach FL	DDRESS)	
	1	,	<u> </u>
(p)	MANCY STOUP!	Office address:	<del></del>
	2326 Pelican Bay Cour	·T	
	Panama City Beach, FL.	32408	<del>,</del>
change agent v was/we the arti	imited liability company is not organized under the law 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 cles of organization or the operating agreement of the land of th	registered officibility company the limited limited limited limited liability	y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.
l here provisi the obl to mer	by accept the appointment as registered agent and agree on a statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have a change of this change.	a to got in this	Printed or typed flame of signed  Scapacity. I further agree to comply with the f my duties, and I am familiar with and accept to 605. F.S. Or, if this document is being filed that the limited liability company has been