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COVER LETTER

TO: Registration Section Division of Corporations TEW MANY HOLDINGS, LLC SUBJECT: ____ 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: Denise H. Rowan, Esq. Name of Person Denise Hallmon Rowan & Associates, PA Firm/Company 1022 West 23rd Street, Suite 600 Address Panama City, Florida 32405 City/State and Zip Code drowan@dhrlegal.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Denise H. Rowan, Esq. Area Code & Daytime Telephone Number Name of Person Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 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

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. N	lame of the limited liability company: TEW MAN	Y HOLDINGS, LLC	
2. (a)		(h)	
, ,	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1944 Frankford Avenue		
•	Panama City		
	Florida 32405		
3.	Date of filing/registration in Florida	4.	Document number
5. (a))		
	Registered Agent and Registered Office shown on the recoi	rds of the Florida Dept. of S	 tate:
	Robert Justin Gorman		
	Registered Office Address (MUST BE FLORIDA STR	EET ADDRESS)	
	1944 Frankford Avenue		
	Panama City	, FL ³²⁴⁰⁵	FILE 2021 MAR 22 SECURETARY TALLAHIASSE
			$m_{\pi} - \Gamma$
(b)	Enter name of NEW Registered Agent and/or NEW Regis		PHIZ: 51 YOF STATE SEE, FLORIDA
	enter name of NEW Registered Agent and/or NEW Regis	stered Office address:	TAT ORI
	Denise H. Rowan, Esq.		0 A
	NEW Registered Office Address:		
	1022 West 23rd Street, Suite 600	_	
	Panama City	FI ³²⁴⁰⁵	
		_,	_
agent v was/wo	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members of organization or the operating agreement of	t the registered office a ed liability company, it ers of the limited liabil	is hereby confirmed that the change(s)
	Clemes H Rouges	Denise H. Row	
Signat	Cleruse W Rowanian ture of a member or authorized representative of a member		Printed or typed name of signee
l heret provisi the obli to mere notified	by accept the appointment as registered agent and ons of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office address in writing of this change.		
کٹ Signatur	enue U Reva	-	