## L18000 181572

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

INHS18 (2/14)

SUBJECT:	#1 GARAGE DOOR, LLC				
SUBJECT.	Name of Limited Liability Company				
Dear Sir or I	Madam:				
The enclosed	d Registered Agent/Registered Off	ice Change and f	See(s) are submitted for filing.		
Please return	n all correspondence concerning th	is matter to the f	ollowing:		
Sydney G	rice				
	Name of Person		_		
Anderson	Business Advisors				
	Firm/Company	1	_		
3225 McL	eod Drive, #100				
	Address		_		
Las Vegas	s, NV 89121				
	City/State and Zip Code		_		
ra@ander	sonadvisors.com				
E-mail	address: (to be used for future ann	ual report notific	cation)		
For further is	nformation concerning this matter.	please call:			
Sydney G	rice	800 at (	7064741		
	Name of Person		Area Code & Daytime Telephone Number		
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations ton Building Executive Center Circle ahassee, Florida 32301	Reg Divi P.O.	ILING ADDRESS: istration Section ision of Corporations Box 6327 ahassee, Florida 32314		
Enc	losed is a check for the following	amount:			
<b>☑</b> \$:	25 Filing Fee	<b>□</b> \$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

	ime of the limited liability company:		R, LLC	2 00 M 05 B1 0000 M 7D 07F B
2. (a)	11765 S ORANGE BLOSSOM TR STE B		(U) . <u></u>	S ORANGE BLOSSOM TR STE B
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	ORLANDO, FL 32837	<del>.</del>	ORLAN	DO, FL 32837
	07/30/2018		 L180001	81572
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	SHARF, ALEXEY			
	Registered Office Address (MUST BE FLORIDA STRE			
	11765 S ORANGE BLOSSOM TR STE E			- ა <b>20</b>
	ORLANDO	3 FL 3283		2022 OC SECRI
(b)		FL_3283	7	2022 OCT 25 SECRETAR TALLAH
(b)	ORLANDO Anderson Registered Agents, Inc.	FL_3283	7	2022 OCT 25 PM I SECRETARY SES
(b)	ORLANDO  Anderson Registered Agents, Inc.  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	FL_3283	7	ZARYS P

was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Sydney Grice	Sydney Grice	
Signature of a member or authorized representative of a member	Printed or typed name of signee	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.
A. T. Mathis,
President

President

On the President of the President of

Signature of Registered Agent