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(Requestor's Name)				
(Addraga)				
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(Address)				
(City/	State/Zip/Phor	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	es of Status		
Special Instructions to Filing Officer:				
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S. YOUNG

COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations				
SUBJE	MODULAR VENTURES, LLC				
		Name of Limited Liability Company			
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered (Office Change a	nd fee(s) are submitted for filing.		
Please	return all correspondence concerning	this matter to t	he following:		
JEREM	IY RICHARDS				
	Name of Person				
MODU	LAR VENTURES, LLC				
	Firm/Company				
4813 B	ELL CHASE CIR				
•	Address				
ТАМР	A, FL 33634				
	City/State and Zip Cod	c			
jeremyt	richards@tungstenlts.com				
E	-mail address: (to be used for future	annual report no	otification)		
For fur	ther information concerning this mat	ter, please call:			
JEREM	IY RICHARDS	754 at (581-2634		
	Name of Person	··· \	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	ing amount:			
	■ \$25 Filing Fee	ū	\$55 Filing Fee & Certified Copy		

Pursuant to the provisions of section 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement to change its registered office and registered agent in the State of Florida.

- 1. The name of the limited liability company is: Modular Ventures, LLC
- 2. The mailing address of the limited liability company is: 4813 Belle Chase Cir, Tampa. FL 33635.
- 3. The date of filing/registration in Florida is: 08/12/2018
- 4. Document number: L18000192802
- 5. The name of the registered agent and the registered office address as shown records of the Florida Department of State:

Joshua D. Fowler 9021 Camino Villa Blvd, Tampa, FL 33635

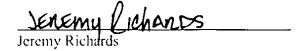
6. The name and address of the new registered agent and office:

Jeremy Richards

4813 Belle Chase Cir. Tampa, FL 33634

(P.O. Box **NOT** acceptable)

If the limited liability company is not organized under the laws of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Alternatively, in the case of a Florida limited liability company, it is hereby confirmed that the changes 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.



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 concerning the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent as provided for in F.S. Chapter 605.

Jeremy Richards