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## **COVER LETTER**

TO: Registration Section Division of Corporations							
SUBJECT: Tropical Solutions 123 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:							
Richard Hueber Name of Person							
Tropical Solutions 123 Firm/Company	<del></del>						
617 Rosmary Circle Address							
Bradenton Fl 34212 City/State and Zip Code							
Tropical Solutions 123 @ 0 E-mail address: (to be used for future annual report	t notification)						
For further information concerning this matter, please call:							
Richard Hueber at (	941 ) 708 - 3086						
Name of Person	Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:							
□ \$25 Filing Fee							

INHS18 (2/14)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOI LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compansubmits the following statement in order to change its registered office or registered agent, or both, in the State & Florida.

rioriaa.					_
1. Nam	e of the limited liability company:	Tropical	50/U7	10WS 123	LLC
2. (a)		O	b)		
2. (u)	Principal office address of limited liability (Note: MUST BE STREET ADDRE	company:		Mailing address of limited li (Note: MAY BE POST O	
_	617 Rosemary circl		617	Rosemary	circle
_	Bradenton F1 34	1212	Brad	entow Fl	34212
	August 23 20 Date of filing/registration in Flor	18	L1	80002021	107
3.	Date of filing/registration in Flor	rida 4.		Document number	
5. (a)	cheyenve Mose and Registered Office shown on	the records of the Florid	orp Ad a Dept. of Stat	gents	
R	Registered Office Address (MUST BE FLORI	DA STREET ADDRES.	<u>Si</u>	-	
<u>Un</u>	uted states Corp. Agents,	INC		-	
/33	302 winding Oak Court TAM	PA . FL 33 0	612	-	
(b) _	Richard Hueber			_	
E	nter name of NEW Registered Agent and/or NE	W Registered Office ac	<u>ldress</u> :		
_	617 Rosemary Circ	/e		_	
<u>N</u>	(EW Registered Office Address:				
-	Bradenton:		· · · · · · · · · · · · · · · · · · ·	<del>-</del>	
_		, FL_ <b>3</b> 9	1212	_	
the chang agent wil was/were	ited liability company is not organized use or changes are made, the Florida street be identical. Or, in the case of a Florida authorized by an affirmative vote of the est of organization or the operating agree	t address of the regi da limited liability of members of the lin	stered office ompany, it i nited liabilit liability con	e and the business offices s hereby confirmed that y company or as other apany.	ce of the registered at the change(s) wise provided in
Signature	e of a member or authorized representative of a m	nember	MICh.	Ard Huebe Printed or typed name of s	rionee
I hereby provision the oblige to merely notified it	accept the appointment as registered ag is of all statutes relative to the proper ar ations of my position as registered agen- reflect a change in the registered office in writing of this change.				
Nonahire (	of Registered Agent				