## 49000 233 117

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(2.3), 2.63.2.2.4.				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Considerations to Filian Officer				
Special Instructions to Filing Officer:				
<u> </u>				

Office Use Only



900331654259

07/11/19--01011--001 \*\*25.00



Y SULKER

JUL 22 2019

## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJ	45 West LLC	,	
	Nar	ne of Limited Liability Company	
Dear S	Sir or Madam:		
The en	nclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.	
Please	e return all correspondence concerning th	nis matter to the following:	
Sara	i Arias		
	Name of Person		
45 V	/est LLC		
	Firm/Company		
1418	3 26th Street N		
	Address	<del></del>	
St Pe	etersburg, FL 33713		
	City/State and Zip Code		
813n	otary.melina@gmail.com		
	E-mail address: (to be used for future and	nual report notification)	
For fu	arther information concerning this matter	, please call:	
Melir	na Arias	813 817-9065	
	Name of Person	Area Code & Daytime Telephone Nu	.mber
	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	g amount:	
	■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

INHS18 (2/14)

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

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

me of the limited liability company: 45 West LLC	45 We	45 West LLC	
Principal office address of limited liability company:	(D)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
4545 W Kennedy Blvd	1418 2	6th Street N	
Tampa, FL 33609	St Pete	ersburg, FL 33713	
10/02/2018	L18000	233117	
Date of filing/registration in Florida	4.	Document number	
Dom Law PA			
Registered Agent and Registered Office shown on the record Dom Law PA	s of the Florida Dept. of S	tate:	
Registered Office Address (MUST BE FLORIDA STRE			
1814 North 15th Street		<u> </u>	
Tampa	FL_33605		
813 Notary and More  Enter name of NEW Registered Agent and/or NEW Registered Office address:			
813 Notary and More			
NEW Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	<del></del>	
7805 N Cortez Ave		<u> </u>	
Tampa	FL 33614	<u></u>	
nge or changes are made, the Florida street addres fill be identical. Or, in the case of a Florida limite re authorized by an affirmative vote of the membe	s of the registered off d liability company, i ers of the limited liabi	ice and the business office of the registe t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  4545 W Kennedy Blvd  Tampa, FL 33609  10/02/2018  Date of filing/registration in Florida  Dom Law PA  Registered Agent and Registered Office shown on the record  Dom Law PA  Registered Office Address (MUST BE FLORIDA STRE)  1814 North 15th Street  Tampa  813 Notary and More  Enter name of NEW Registered Agent and/or NEW Registered Office Address: 7805 N Cortez Ave  Tampa  mited liability company is not organized under the new or changes are made, the Florida street addressill be identical. Or, in the case of a Florida limite re authorized by an affirmative vote of the member of the street and the reauthorized by an affirmative vote of the member of the street authorized by an affirmative vote of the member of the street and the reauthorized by an affirmative vote of the member of the member of the member of the street addressill be identical. Or, in the case of a Florida limite reauthorized by an affirmative vote of the member of the street addressill be identical.	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  4545 W Kennedy Blvd  Tampa, FL 33609  St Peter  10/02/2018  L18000  Date of filing/registration in Florida  Dom Law PA  Registered Agent and Registered Office shown on the records of the Florida Dept. of St Dom Law PA  Registered Office Address  (MUST BE FLORIDA STREET ADDRESS)  1814 North 15th Street  Tampa  FL 33605  813 Notary and More  Enter name of NEW Registered Agent and/or NEW Registered Office address:  813 Notary and More  Enter name of NEW Registered Agent and/or NEW Registered Office address:  813 Notary and More  Tampa  FL 33614  mited liability company is not organized under the laws of the State of Inge or changes are made, the Florida street address of the registered of ill be identical. Or, in the case of a Florida limited liability company, i re authorized by an affirmative vote of the members of the limited liabiles of organization or the operating agreement of the limited liability of the limited liab	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent