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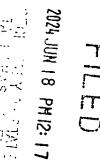
(Requestor's Name)							
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(Business Entity Name)							
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COVER LETTER

-	stration Section sion of Corporations		
SUBJECT:	WE SELL ROYAL PALM POLO	, LLC	
30B0B011	N	ame of Limited Li	ability Company
Dear Sir or M	fadam:		
The enclosed	Registered Agent/Registered C	Office Change and	fee(s) are submitted for filing.
Please return	all correspondence concerning	this matter to the	following:
MICHELLE S	ILVERMAN		
	Name of Person		<u> </u>
	Firm/Company		
17813 FIELDE	BROOK CIRCLE		·
	Address		-
BOCA RATO	N/FL 33496		
	City/State and Zip Code		_
MICHELLE.H	I.SILVERMAN@GMAIL.COM		
E-mail a	address: (to be used for future a	nnual report notifi	cation)
For further in	formation concerning this matte	er, please call:	
MICHELLE S	ILVERMAN	561 at (901-2501
	Name of Person	a. (Area Code & Daytime Telephone Number
Regis Divis P.O.	ing Address: stration Section sion of Corporations Box 6327 hassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclo	osed is a check for the following	ng amount:	
■ \$2	5 Filing Fee	□ \$5	5 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. Na	ame of the limited liability company: WE SELL ROY	AL PA	LM POLO, LLC	3			
2. (a)	WE SELL ROYAL PALM POLO, LLC		(b) WE SELL ROYAL PALM POLO, LLC				
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability of the May BE POST OFFICE				
	17813 FIELDBROOK CIR W		17813 FIE	LDBROOK CIR W			
	BOCA RATON, FL 33496		BOCA RA	ATON, FL 33496			
	06/18/2024		L180002779	953			
3.	Date of filing/registration in Florida	4.		Document number	r		
5. (a)	MICHELLE SILVERMAN						
J. (4)	Registered Agent and Registered Office shown on the records of MICHELLE SILVERMAN	of the Fl	orida Dept. of State	_ e:			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 2530 NW 70TH BLVD			-	202		
	BOCA RATON , F	FL	6	- 2 <u>5</u>	2024 JUN 18	<u> </u>	
(b)	MICHELLE SILVERMAN				ζ.	F	
(-)	Enter name of NEW Registered Agent and/or NEW Registered	ed Offic	e address:		PM 12: 17	Ö	
	NEW Registered Office Address:		· ·	_			
	17813 FIELDBROOK CIRCLE W			_			
	BOCA RATON, F	L 3349	6	_			
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited last ere authorized by an affirmative vote of the members acles of organization or the operating agreement of the	ne regis liability of the c limit	tered office and company, it is limited liability	d the business offices hereby confirmed by company or as of open,	ce of the	registered change(s)	
Signa	Signature of a member of authorized representative of a member			Printed or typed name of signee			
I herei provisi the obl to mere notified	by accept the appointment as registered agent and as ons of all statutes relative to the proper and completing in a provide statute of my position as registered agent as providely reflect a change in the registered office address, less than the provided of this change.	gree to e perfo led for l hereb	act in this capa rmance of my a in Chapter 605, y confirm that t	acity. I further agr duties, and I am far , F.S. Or, if this do the limited liability	ee to co niliar w cument compai	mply with the ith and accept is being filed ny has been	
Signátu	ce of Registered Agent						