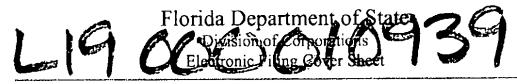
3/25/22, 10:17 AM

To: +18506176383

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220001107083)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : **120010000062**Phone : (323)962-8600
Fax Number : (323)962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

2 HAR 25 PM 2: 34

## LLC REGISTERED AGENT CHANGE TRAP OF MINKS LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

AND FILED 27 MAR 25 PM 4: 4

Electronic Filing Menu

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## Page: 3 of 4

## COVER LETTER

	istration Section ision of Corporations		
SUBJECT:	TRAP OF MINKS LLC		
John John		ne of Limited Li	ability Company
Dear Sir or	Madam:		
The enclose	d Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.
Please retur	n all correspondence concerning th	is matter to the	following:
Cheyenne	e Moseley		
	Name of Person		_
Legalzoo	m.com, Inc.		
	Firm/Company	·	<del>-</del>
101 N. Br	and Blvd., 10th Floor		
	Address		
Glendale	, CA 91203		
	City/State and Zip Code		_
•	ks305@gmail.com		
E-mai	laddress: (to be used for future and	nual report notif	ication)
For further	information concerning this matter	, please call:	
Cheyenne	e Moseley	800 at (	773-0888 ext 9724
	Name of Person	;; (	Area Code & Daytime Telephone Number
Reg Div Clit 266	gistration Section rision of Corporations fton Building I Executive Center Circle lahassee, Florida 32301	Re Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314
En	closed is a check for the following	g amount:	
	\$25 Filing Fee	<b>☑</b> \$:	55 Filing Fee & Certified Copy
INHS18 (2/1	4)		

From: Sylvia Pa

## 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	me of the limited liability company: TRAP OF M	IINKS LLC			_	<u>_</u> ,	
( <del></del> )	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			my:	
	1834 Jackson Bluff Rd., Apt F22	_	1834 Jackson Bluff Rd., Apt F22 Tallahassee, Florida 32304				
	Tallahassee, Florida 32304						
	01/09/2019	L	19000010939				
3.	Date of filing/registration in Florida	4.	Document nun	nber			
5 (0)							
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florida D	ept, of State:				
	UNITED STATES CORPORATION AGEN						
	Registered Office Address (MUST BE FLORIDA STREE		<del></del>				
	5575 S. Semoran Blvd., Suite 36	•					
	Orlando	<sub>L</sub> 32822	<del></del>				
	,		<del></del>	<u>:-</u> ;:	202:		
(b)			· <u> </u>		022 MAR	~	
	Enter name of NEW Registered Agent and/or NEW Register	ed Office addr	<u>ess</u> :	77	R 2		
	Idara Dorsey				S PH	L CO	
	NEW Registered Office Address:		<del>.</del>	· · ·			
	1834 Jackson Bluff Rd., Apt F22				8 դ ։ դ		
	Tallahassee, ı	FL 32304					
the cha agent was/w the art Signa	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the number of a member or authorized representative of a member oby accept the appointment as registered agent and a lions of all statutes relative to the proper and completing to the proper and completing to the proper and completing to the proper and completely reflect a change in the registered office address,	of the registe liability con s of the limit he limited lia ldare	pred office and the busine inpany, it is hereby confired liability company or a bility company.  I Dorsey  Printed or typed  This connective I further	med that the s otherwise	t the re e chang provid	gistered ge(s) led in	
попри П	a in writing of this change.		-				
Signar	me of Registered Agent	лосу					