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(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
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Cadified Caulan	Codification	of Chahun					
Certified Copies Certificates of Status							
Special Instructions to	Filing Officer:						





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## **COVER LETTER**

TO: Registration Section Division of Corporations	
Undeserved Grace LLC SUBJECT:	
	f Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Daniel Husted	
Name of Person	
Firm/Company	
1050 S.E. Monterey Road, Ste. 400	
Address	
Stuart, FL 34994	
City/State and Zip Code	
dshusted@hotmail.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, plea	ase call:
Daniel Husted	772 233-9680
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 ame	ount:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

## 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.	Name of the limited liability company:	ce LLC					
2. (a	1050 S.E. Monterey Road, Ste. 400	ſ	(b) 1050 S.E. Monterey Road, Ste. 400				
2. (4	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	Stuart, FL 34994	_	Stuart, FL	. 34994			
		_					
	01/18/2019		L19000021	1023			
3.	Date of filing/registration in Florida	4.		Document nur	nber		
5. (a	Jeffrey C Pepin						
·	Registered Agent and Registered Office shown on the records of (	he Florio	da Dept. of Stat	te:			
	3418 Poinsettia Ave						
	Registered Office Address (MUST BE FLORIDA STREET A	<u>IDDRES</u>	<u>SS)</u>				
	West Palm Beach , FL	33407		_	TĂĹ	2021	
(b	Daniel Husted				EAHASS	1 APR 29	
·	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddress:		<u> (SSI</u>	29	
	1050 S.E. Monterey Road, Ste. 400				E FE		er koro- rrre
	NEW Registered Office Address:			_	STATE LORIDA	PH II: 03	**
	Stuart . FL	34994		_			
chang agent	limited liability company is not organized under the law ge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida/limited lial were authorized by an affirmative rose of the premisers of ticles of organization or the operating agreement of the l	register bility c f the lir	red office an ompany, it i nited liabilit	d the business of s hereby confirms by company or a	office of med that	the re t the cl	gistered nange(s)
	1)/(2)/(2)		niel Husted				
Sign	nature of a member or pathorized assessmentive of a member			Printed or typed	name of s	ignee	
I her provi the or to me notifi	eby agcept the appointment as registered agent and agressions of all statutes relative to the proper and complete to bligdions of my position as registered agent as provided rely reflect of change in the registered office address, I have a writing of this change.	ee to ac perform I for in ereby c	et in this cap nance of my Chapter 605 confirm that	acity. I further duties, and I an 5, F.S. Or, if th the limited liah	agree to n familio is docun ility con	o comp ir with nent is npany i	oly with the and accept being filed has been