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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : REGISTERED AGENTS INC. Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010 \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* Email Address:\_

## LLC REGISTERED AGENT CHANGE ALEXFIXELIP LLC

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## 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.

		me of the limited liability company:		LLC				
2. (	<b>)</b>	208 MILTON STREET	(b) 208 MILTON STREET					
۷. (۰	.1)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
		LOT 01291918072		LOT 01	.29191807	2		
		DEDHAM, MA 02026	DEDHAM, MA 02026					
		01/31/2019		L190000	31794			
3.		Date of filing/registration in Florida	4.		Document nur	mber		· · · · · · · · · · · · · · · · · · ·
5.	()	LEGALINC CORPORATE SERVICES INC.						
ا .ز.	(4)	Registered Agent and Registered Office shown on the records of th	e Florida	a Dept. of State	- !:			
		5237 SUMMERLIN COMMONS						
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				-	:55	20	
		SUITE 400				17E	20 F	Alling
		FORT MYERS , FL.	3390	7	_	E I W	E8 -	Eliments F
	1.	Registered Agents Inc.				ORETAR! OF STAT FALLAHASSEE, FL	2020 FEB -4 AMII: 02	
(	(b) Enter name of NEW Registered Agent and/or NEW Registered Office addr				•		==	U
		7901 4th St N				FLATE	02	
		NEW Registered Office Address:			<del>-</del>			
		STE 300			-			
		St. Petersburg	33702	2	_			
the age was the	cha nt v /w/ art	imited liability company is not organized under the law inge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the limited.	the regit bility of the lin imited	stered office ompany, it i nited liabilit	e and the busin s hereby confir y company or a upany.	iess office rmed that t as otherwi	of the a he char se prov	registered nge(s)
Si	gna	ture of a member or authorized representative of a member			Printed or typed	name of sig	nee	
pro the to n not	visi obi uer Ge	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change.  Bill Havre - Assistant  or of Registered Agent	perform for in ereby c	iance of my Chapter 603 confirm that	acity. I furthe. duties, and I a 5, F.S. Or, if th the limited liat	r agree to m familiar his docume bility comp	comply with a ent is be eany he	with the nd accept eing filed is been

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