119000037842

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to Filing Officer.				

Office Use Only



800388566808

RAGRO Charles



A. RAMSEY MAY 3 1 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195								
REFERENCE : 711378 8365778								
AUTHORIZATION :								
COST LIMIT : \$125.00								
ORDER DATE: May 26, 2022								
ORDER TIME : 9:14 AM								
ORDER NO. : 711378-015								
CUSTOMER NO: 8365778								
CHANGE OF AGENT								
NAME: WHY I OUGHTA, LLC								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON: Eyliena Baker EXT#								
EXAMINER:								

COVER LETTER

Division of Corporations					
Why I Oughta, LLC					
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matte	r to the following:				
EPIQ Capital Group					
Name of Person					
EPIQ Capital Group					
Firm/Company					
9650 Gateway Drive Suite 200					
Address					
Reno, NV 89521					
City/State and Zip Code					
wilburteam@epiqcg.com					
E-mail address: (to be used for future annual repo	ort notification)				
For further information concerning this matter, please	call:				
at (_)				
Name of Person	Area Code & Daytime Telephone Number				
Mailing Address:	Street Address:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee				
tananassee, Ft. 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enclosed is a check for the following amoun	t:				
□ \$25 Filing Fee	☐ \$55 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. N	ame of the limited liability company: WHY I OUGHTA	, LLC		
2. (a)	40 CENTRAL STREET NARRAGANSETT, RI 02882	(b	1000 LINC	COLN RD 208 MIAMI BEACH, FL 33139
_	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (**		lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.	02/06/2019 Date of filing/registration in Florida	- 4.		842 Document number
	HIGHPOINT TITLE & ESCROW LLC	٦,	•	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1000 LINCOLN RD Registered Office Address (MUST BE FLORIDA STREET ADDRESS) STE 208			202 HAY 27 H 9: 00
	MIAMI BEACH FI	33139		10000000000000000000000000000000000000
	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company NEW Registered Office Address: 1201 Hays Street	Office add	ress:	
	Tallahassee . FL	32301		
change agent v was/wa	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liabers.	egistered lifty cor the limi mited li	l office and npany, it is ted liability tomp	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	What interest of a member or authorized representative of a member	Jose	ph Wilbur	Printed or typed name of signee
I herei provisi the obl to mere notifica	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address. I he is in writing of this change.	e to act i erforma for in Ci ereby con	n this canad	rity. I further garee to comply with the
Signatu	re of Registered Agent			
	5111 46 . 55 5			