L19 0000 49163

(Req	uestor's Name)	
(Add	ress)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	 -
		·

Office Use Only



900359583639

02/15/21--01024--015 **25.00

O SIMMONS 1505 O BAN

4367 9 0 88W

COVER LETTER

	egistration Section ivision of Corporations		
SUBJEC	Three18 Productions, LLC		
		Name of Limited L	iability Company
Dear Sir c	or Madam:		
The enclo	sed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.
Please ret	urn all correspondence concernin	g this matter to the	following:
Josh Wein	ег		
	Name of Person		
Three18 P	roductions, LLC		
	Firm/Company		_
4625 Suga	r Pine Dr.		
	Address		
Boca Rato	n, FL 33487		
, n	City/State and Zip Co	de	
three 18pro	ductionsllc@gmail.com		
E-m	ail address: (to be used for future	annual report notif	ication)
For furthe	er information concerning this ma	tter, please call:	
Josh Wein	er	804 at (5135002
	Name of Person	u (Area Code & Daytime Telephone Number
R D P	lailing Address: egistration Section vivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
E	nclosed is a check for the follow	ving amount:	
	\$25 Filing Fee	□ \$2	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.

	4625 Sugar Pine Dr, Boca Raton, FL 33487	4625 Sugar Pine Dr. Boca Raton, FL 334		487
(a) ₋	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability (Note: MAY BE POST OFF)	, , ,
	1/19/21	 L19	9000049163	
	Date of filing/registration in Florida	4.	Document number	
(a)	LEGALINC CORPORATE SERVICES INC.			
	Registered Agent and Registered Office shown on the records of		pt. of State:	
	Registered Office Address (MUST BE FLORIDA STREET.	<u>ADDRESS)</u>		
	5237 SUMMERLIN COMMONS SUITE 400			
	Ft. Myers	33907	<u> </u>	
			2621 FEB 15	
(b)	Josh Weiner		:	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office addre	<u>ss</u> :	1
	Three18 Productions, LLC		<u>555</u> :	n n
	NEW Registered Office Address:			
	4625 Sugar Pine Dr.			
	Boca Raton , FL	33487		
nge nt w /wc	mited liability company is not organized under the law or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited lia- re authorized by an affirmative vote of the members of closs of organization or the operating agreement of the	registered of ability comp of the limited limited liab	office and the business office of the sany, it is hereby confirmed that the d liability company or as otherwise ility company.	registered change(s)
/	hv	Josh Wo		
ereb visio obli	ure of a member or authorized representative of a member by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address. It	performanc d for in Cha	e of my duties, and I am Jamiliar wi pter 605, F.S. Or, if this document	nply with the ith and acce is being file