## 1190000 67254

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

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SECRETARY OF STATE
FALL ARASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section Division of Corporations			
Marvelous Pawn LLC SUBJECT:			
Name	e of Limited	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offic	ce Change ar	nd fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to th	e following:	
Marvin D. Colon			
Name of Person		<del></del> -	
Marvelous Pawn LLC			
Firm/Company	· - · · · · ·	<del></del>	
1604 Osceola Park Drive			
Address			
Kissimmee, FL 34741			
City/State and Zip Code		<del></del> :	
marvelouspawn@yahoo.com			
E-mail address: (to be used for future annu	ial report not	ification)	
For further information concerning this matter, [	please call:		
Marvin D. Colon	407 _ at (	963-3095	
Name of Person	<u> </u>	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	:N	TAILING ADDRESS:	
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check for the following:	amount:		
\$25 Filing Fee & already sent		\$55 Filing Fee & Certified Copy	
INHS18 (2/14)			

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FO LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605,0114 or 605,0116, Florida Statutes, the undersigned limited liability compatibility the following statement in order to change its registered office or registered agent, or both, in the State Florida.

L Na	ame of the limited liability company: Marvelous P	awn LLC	
2. (a)		(b)	
· · ·	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)
	4321 Edgewater Drive		
	Orlando, FL 32804		
	03/08/2019	L19(	000067254
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Marvin D. Colon		
J. (a)	Registered Agent and Registered Office shown on the records of	of the Florida Dept.	of State:
	Registered Office Address (MUST BE FLORIDA STREET	TADDRESS)	
	1604 Osceola Park Drive		57
	Kissimmee, F	34741	19 JI
(b)	Marvin D. Colon		FIL 19 JUN 21 SECRETAR ILLAHASS
(0)	Enter name of NEW Registered Agent and/or NEW Registere	FE FLORIC	
			프로 <del>*</del> O
	NEW Registered Office Address:		
	4321 Edgewater Drive		<i>₩</i>
	Orlando	L 32804	
the cha agent v was/wo	imited liability company is not organized under the launge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registered liability compar of the limited I	l office and the business office of the regist ny, it is hereby confirmed that the change(s iability company or as otherwise provided
	Mil	Marvin (	D. Colon
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
I herei provisi the obl	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provid	gree to act in the c performance ( led for in Chapt	is capacity. I further agree to comply with of my duties, and I am familiar with and ac er 605, F.S. Or, if this document is being f

to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent