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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.\*\*

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 Address:		 

## LLC REGISTERED AGENT CHANGE **COOLBUDS LLC**

Certificate of Status	0
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Help MAR 20 2020

## 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.

Florie		A DUDG LLC
1. N	Same of the limited liability company:	LBUDS LLC
2. (a'	1015 12 ave west	(b) 1015 12 ave west
<b>2</b> . (,	Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	many: Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Lot 50	Lot 50
	Palmeto, FL 34221	Palmeto. FL 34221
	03/18/2019	L19000075168
3.	Date of filing/registration in Florida	4. Document number
	LINITED STATES CORPORATION A	GENTS. INC.
5. (a) (b)	Registered Agent and Registered Office shown on the in	
	5575 S. SEMORAN BLVD	
	Registered Office Address (MUST BE FLORIDA S	STREET ADDRESS)
	SUITE 36	202
	ORLANDO	2020 HAR 19
		39
	Registered Agents Inc.  Enter name of NEW Registered Agent and/or NEW F	Positored Office address:
	Enter name of NEW Registered Agent and/or MEW F	Registered Office address:
	7901 4th St N STE 300	= $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$
	NEW Registered Office Address:	
	Ct Deterchurg	
	St. Petersburg	, FL
the eager	change or changes are made, the Florida street a	er the laws of the State of Florida, it is hereby confirmed that after ddress of the registered office and the business office of the registered limited liability company, it is hereby confirmed that the change(s) nembers of the limited liability company or as otherwise provided in ent of the limited liability company.  Riley Park
Si	gnature of a member or authorized representative of a mem	ber Printed or typed name of signee
1 In	ereby accept the appointment as registered agen	nt and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with and acce s provided for in Chapter 605, F.S. Or, if this document is being file ddress, I hereby confirm that the limited liability company has been

ordified in writing of this change.

- Assistant Secretary

Signature of Registered Agent