L19000 139422

(Re	equestor's Name)		
(Ac	idress)		
(Ac	ddress)		
(Ĉi	ty/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Bı	usiness Entity Nam	e)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
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D. BRUCE AUG 20 2020

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Tsenhower Enter Name of Limited L	Prises, LLC Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and	fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the	following:	
Jennifer I Senhower Name of Person		
I Senhower Enterprises, LL	<u>_C.</u>	
11900 S. Cleveland au	_	20 Si
Fity/State and Zip Code	· 	20 JUL -8 TALLAHAS
E-mail address: (to be used for future annual report notif	ication)	SSEE T
For further information concerning this matter, please call:		12 12
Jennifer Isechouer at (239) Name of Person) 936-8753 Area Code & Daytime Telephone N	umber
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	

Enclosed is a check for the following amount:

\$25 Filing Fee

Tallahassee, FL 32314

☐ \$55 Filing Fee & Certified Copy

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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: Senhauer {	enterprise	o, LLC	
2. (a)	11000 0 0 10	1	\$7.	
2. (a)	Principal office address of limited liability company:	Mailing address o	of limited liability company:	
	(Note: MUST BE STREET ADDRESS)	_	BE POST OFFICE BOX)	
	It Murs, 61 33907			
				
	5/23/2019	19000 139	1422	
3.	Date of filing/registration in Florida 4.	Document nui	mber	
5. (a)				
(-,	Registered Agent and Registered Office shown on the records of the Florida Dept. o	f State;		
	HARRY O. HENDRY			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	2164B WEST FIRST STREET		(3 2	
	FORT MYERS 533901		D20 J EC:	أسأت
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address: 11900 S. Cleveland Que NEW Registered Office Address:		-8 M 7: 12	
	ft Myers FL 339	<u> </u>		
agent v	imited liability company is not organized under the laws of the State of or changes are made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited liability company, are authorized by an affirmative vote of the members of the limited liability of organization or the operating agreement of the limited liability	e and the business , it is hereby confir bility company or a	office of the registered med that the change(s)	
Signa	thre of a member or authorized representative of a member	Printed or typed	T Senhauw	
I here, provisi the obl to mere	by accept the appointment as registered agent and agree to act in this ions of all statutes relative to the proper and complete performance of ligations of my position as registered agent as provided for in Chapter ely reflect a change in the registered office address, I hereby confirm the din writing of this change.	canacin I factor	r agras to comply with t	he epi 'ed
Signatu	rd of Registerd Agent			