5/21/2021

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone

: (855)330-1010 Fax Number

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## 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

		MESHELI	F JF	WELF	RYIIC			
1.		me of the finited flability company.						
2. (a	<sub>2. (a)</sub> 13787 VANCANZA DR. <sub>(b)</sub> 13787 VANCAN							
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limit (Note: MAY BE PO)			
		VENICE, FL 34293		VENIC	E, FL 34293			
		VERTICE, I'E O'VESO	_					
			_	<del>.</del>				
		05/28/19	!	_190001	141587			
3.		Date of filing/registration in Florida	4,		Document number			
5. (		UNITED STATES CORPORATION AGENTS	, INC.					
.). (	a)	Registered Agent and Registered Office shown on the records of th	e Florida	Dept. of State	- e:			
		5575 S. SEMORAN BLVD						
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)	-	-			
		SUITE 36				(O	2	
			32822		- \$	ECE FOR	2021 HAY 21	C2:7F)
		Onando , FL	12022		. <u>.</u>	- <u>~</u>		02224 3
,1	_ \	Registered Agents Inc.			حو مه ا	ANSSELL LO AUVI	21	,
(1	(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		ress:	- :	νς ΥΘ.	P	g i g	
		<del> </del>			Ţ	15.00 15.00	PM 4: 54	
		7901 4th St N	····	<u>.</u>	r	끄줌	<u>5</u>	
		<u>NEW</u> Registered Office Address:				t <sub>al</sub>	-	
		STE 300			<del>.</del> .			
		St. Petersburg	33702					
		St. 1 etcisbuig FL			<del></del>			
the c agen was/	tha it w we	mited liability company is not organized under the law- nge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited liab- tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regis pility co the lim	tered office mpany, it is ted liabilit	e and the business to s hereby confirmed y company or as of	that t	or the he cha	registereu ngc(s)
_				y Park	•			
Signature of a member or authorized representative of a member					Printed or typed name	of Sign	nee	
prov the c to m notin	isi ere geo	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 ly reflect a change in the registered office address, I had be a supplying of this change.  Bill Havre - Assistant to the Registered Agent	for in C ereby ca	nce of my hapter 605 nfirm that	auties, ana 1 am jai 5. F.S. Or. if this do	тинат осите	wun a nt is b	na accept eing filed