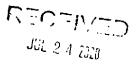
L19000149658

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SECRETARY OF STATI

Ja 09/15/20

COVER LETTER

	gistration Section vision of Corporations				
SUBJECT	FEDERAL CONNECT LLC				
SOBJECT		Name of Limited Liability Company			
Dear Sir o	r Madam:				
The enclos	sed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.		
Please retu	irn all correspondence concerning	g this matter to the	following:		
CRYSTAL	MARTIN				
	Name of Person				
FEDERAL	CONNECT				
	Firm/Company		_		
18400 GUI	LF BLVD				
	Address				
INDIAN R	OCKS FL 33785				
	City/State and Zip Cod	le	_		
FEDERAL	CONNECT@YAHOO.COM				
E-ma	ail address: (to be used for future	annual report notifi	ication)		
For further	information concerning this mat	ter, please call:			
CRYSTAL	MARTIN	727 at (424 2618		
· · · · · · · · · · · · · · · · · · ·	Name of Person		Area Code & Daytime Telephone Number		
Re Di P.	ailing Address: egistration Section ivision 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		
Er	nclosed is a check for the follow	ing amount:			
■ \$25 Filing Fee			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.

400 GULF BLVD INDIAN ROCKS FL 33785 Principal office address of limited liability company:	2965 B	BUTTONBUSH CT PALM HARBOR FL 34684	
Deinainal office address of limited Matrice	ini		
(Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
7/21/20	L190001	49658	
Date of filing/registration in Florida	- _{4.}	Document number	
AREN KANYUCK			
gistered Agent and Registered Office shown on the records of		State:	
egistered Office Address (MUST BE FLORIDA STREET) ULF BLVD	ADDRESS)		
NDIAN ROCKS	33785		
RYSTAL MARTIN ter name of NEW Registered Agent and/or NEW Registered	l Office address:	FILE 1 2020 JUL 24 AM SECRETARY OF TALLAHASSE	
EW Registered Office Address:		SEE AM	
3400 GULF BLVD		AM 11: 02 OF STATE SEE, FL	
NDIAN ROCKS , FL	33785		
changes are made, the Florida street address of the be identical. Or, in the case of a Florida limited lia authorized by an affirmative vote of the members of organization or the operating agreement of the	registered office ability company, i of the limited liabi	and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in ompany.	
of a member or authorized representative of a member		Printed or typed name of signee	
accept the appointment as registered agent and agree of all statutes relative to the proper and complete tions of my position as registered agent as provided reflect a change in the registered office address, I have the writing of this change.	ee to act in this co performance of m d for in Chapter 6 hereby confirm the	apacity. I further agree to comply with the ty duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been	
tectas 42 active	DIAN ROCKS , FL ed liability company is not organized under the law changes are made, the Florida street address of the pe identical. Or, in the case of a Florida limited lie uthorized by an affirmative vote of the members of organization or the operating agreement of the far member or authorized representative of a member of all statutes relative to the proper and complete ons of my position as registered agent as provides effect a change in the registered office address. It	DIAN ROCKS ded liability company is not organized under the laws of the State of changes are made, the Florida street address of the registered office be identical. Or, in the case of a Florida limited liability company, is uthorized by an affirmative vote of the members of the limited liability of organization or the operating agreement of the limited liability of a member or authorized representative of a member Coccept the appointment as registered agent and agree to act in this case of all statutes relative to the proper and complete performance of mons of my position as registered agent as provided for in Chapter of effect a change in the registered office address. I hereby confirm the	