1900 86 583

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



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SEU. ARASSEE, FL

SEP 1 0 2019

COVER LETTER

| TO: | Registration Section Division of Corporations | | | | | |
|---|--|---|--|--|--|--|
| | · | | | | | |
| SUBJE | ECT: Harcourt Holdings LLC | | | | | |
| | Name of Limited Liability Company | | | | | |
| Dear S | ir or Madam: | | | | | |
| The en | closed Registered Agent/Registered Offi | ice Change and fee(s) are submitted for filing. | | | | |
| Please | return all correspondence concerning thi | is matter to the following: | | | | |
| | Ariel Amio Name of Person | | | | | |
| | Harcourt Holdings, LLC Firm/Company | _ | | | | |
| | 925 S. Semoran Blvd., Ste 122 Address | | | | | |
| | Winter Park, FL 32792 City/State and Zip Code | | | | | |
| | · | | | | | |
| E | _ariel@baterbys.com -mail address: (to be used for future ann | ual report notification) | | | | |
| | ther information concerning this matter, | • | | | | |
| | Joy Fledelius Name of Person | at (<u>561</u>) <u>312-4667</u> Area Code & Daytime Telephone Number | | | | |
| | STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | | | | |
| Enclosed is a check for the following amount: | | | | | | |
| | ☑ \$25 Filing Fee | ☐ \$55 Filing Fee & Certified Copy | | | | |
| INHS18 | 3 (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.

Name of the limited liability company: Harcourt Holdings LLC

| 2. (a) | | (b) | |
|---|--|--|--|
| | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAYBE POST OFFICE BOX) |
| | 925 S. Semoran Blvd. Ste 122 | _ | 925 S. Semoran Blvd. Ste 122 |
| | Winter Park, FL 32792 | | Winter Park, FL 32792 |
| | July 19, 2019 | | L19000186583 |
| 3. | Date of filing/registration in Florida | 4. | Document number |
| 5. (a) | Ariel Amio Registered Agent and Registered Office shown on the records of t | he Florida Dept. of ! | State: |
| | 9100 Conroy Windermere Road | | |
| | Registered Office Address (MUST BE FLORIDA STREET A | (DDRESS) | 20 |
| | Ste 200 | | P AUG 2019 AUG SELLA |
| | Windermere FL | 34786 | 6 2 9 AHA |
| (b) | | | FILLED 9 AUG 29 PH 2 |
| | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> (| Office address: | 2: 16 |
| | 925 S. Semoran Blvd. | | • - |
| | NEW Registered Office Address: | | _ |
| | Ste. 122 | | <u> </u> |
| | Winter Park , FL | 32792 | <u></u> |
| the cha agent was/was/was/was/was/was/was/was/was/was/ | imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of ieles of organization or the operating agreement of the l | the registered of sbility company, f the limited liab | fice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in |
| | | | ariol amb |
| Signa | ture of a member of authorized representative of a member | | Printed or typed name of signee |
| I here provisi the obt to mer notified | by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I h d in writing of this change. | ee to act in this c performance of t I for in Chapter (pereby confirm th | apacity. I further agree to comply with the my duties, and I am familiar with and accept 505, F.S. Or, if this document is being filed at the limited liability company has been |
| Signatu | re of Registered Agent | | |