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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
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Certified Copies Certificates of Status	_
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SECRETARY OF STATE

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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJI	Signature Office Suites, LLC		
		e of Limited	Liability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered Offi	ice Change an	d fee(s) are submitted for filing.
Please	return all correspondence concerning the	Name of Limited Liability Company  gistered Office Change and fee(s) are submitted for filing.  Incerning this matter to the following:  Person  Zip Code  If future annual report notification)  this matter, please call:	
Chris	topher C. Sanders, Esq.		
	Name of Person		<del></del>
Sand	ers Law Group, P.A.		
	Firm/Company		<del></del>
2958	1st Avenue N.		
	Address	annual report notification)  er, please call:  at (727 ) 328-7755  Area Code & Daytime Telephone Number  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	
St. Pe	etersburg, FL 33713		
-	City/State and Zip Code		<del></del>
chris(	@sanderslawgroup.com		
Ē	-mail address: (to be used for future ann	ual report not	ification)
For fur	ther information concerning this matter,	please call:	
Chris	Sanders		328-7755
_	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	R D P	Legistration Section Division of Corporations LO. Box 6327
	Enclosed is a check for the following	amount:	
	☑ \$25 Filing Fee	<b>-</b>	\$55 Filing Fee & Certified Copy
INHS1	8 (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: Signature C		LLC			
147 2nd Ave. S.	(b) 14	(b) 147 2nd Ave. S.			
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited (Note: MAY BE POST	-		:
Ste. 207					
St. Petersburg, FL 33701		<del>_</del>			
08/01/2019	L19	9000196712			
Date of filing/registration in Florida	4.	Document number			
Anthony Nogueras					
Registered Agent and Registered Office shown on the records of	of the Florida Dept	t. of State:			
147 2nd Ave. S.					
Registered Office Address (MUST RE FLORIDA STREET	T ADDRESS)				
Ste. 207					
Saint Petersburg	33701	<del></del>			
	<u> </u>	<del></del>	7	2	
Christopher C. Sanders, Esq.				<b>9</b>	
Enter name of NEW Registered Agent and/or NEW Registers	ed Office address:	:	가설 IOM	2019 AUG	-
Sanders Law Group, P.A.				30	
NEW Registered Office Address:			77.5	<b>739</b>	5
2958 1st Avenue N.			100 100 100 100 100 100 100 100 100 100	=	Ę
	L 33713		91.00 31.41	AK II 30	
St. Petersburg	22712				