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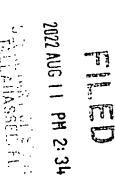
(Re	questor's Name)	
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(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	or Status
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COVER LETTER

TO: Registration Section Division of Corporations	·							
SUN AND WONDER PHOTOGR.	APHY, LLC							
Name of Limited Liability Company								
Dear Sir or Madam:								
The enclosed Registered Agent/Registered Of	fice Change and	fee(s) are submitted for filing.						
Please return all correspondence concerning th	his matter to the	following:						
Name of Person		_						
SERRANO LAW								
Firm/Company								
25275 WESLEY CHAPEL BLVD								
Address		_						
LUTZ. FLORIDA 33559								
City/State and Zip Code								
mike@mikeserranolaw.com								
E-mail address: (to be used for future an	nual report notif	ication)						
For further information concerning this matter	, please call:							
MICHAEL A. SERRANO	813 at (929-4231						
Name of Person		Area Code & Daytime Telephone Number						
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
Enclosed is a check for the following	g amount:							
■ \$25 Filing Fee	\$55 Filing Fee & Certified Copy							

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Fursuant 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. Na	ame of the limited liability company: SUN AND WON	DER PI	но.	rography	LLC			
2. (a)	23110 State Road 54 #130		(b)	23110 State	Road 54 #130			
2. (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(~)	Ma	ailing address of (Note: MAY BI			
	Lutz, Florida 33549	_		Lutz, Florida	33549			
	<u> </u>							
	January 31, 2022		L	.1900022374.	3			
3.	Date of filing/registration in Florida	4.		D	ocument nun	ıber		
5. (a)	Registered Agent and Registered Office shown on the records of t							
		the Flori	da I	Dept. of State;				
	MCGUIRE, MOLLI ESQ.					-4°	202	
	Registered Office Address (MUST BE FLORIDA STREET) 25275 WESLEY CHAPEL BLVD	4 <i>DDKE</i> .	<u>88)</u>			ALL	2022 AUG 11	
	LUTZ, FL	33559				ALLAHASS	3 -	
	,112	·				3328	P	
(b)						114 115	2: 34	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	<u>ıddr</u>	ress:		1 1	34	
	SERRANO LAW							
	NEW Registered Office Address:							
	25275 WESLEY CHAPEL BLVD							
	LUTZ , FL	33559						
change agent v was/we the arti Signal I herea provisi the oblito mere	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the law of a member or authorized representative of a member by accept the appointment as registered agent and agreeions of all statutes relative to the proper and complete in its investigations of my position as registered agent as provided ally reflect a change in the registered office address. The first writing of this change	registe ability of the li limited	red com mit l lia	office and to pany, it is he defined liability compassion of the second of this capacity of this capacity.	the business of the purpose of the company or a lany. Printed or typed to the company of the company or a language of the company of the com	office of the	he reg	istered ange(s) vided in

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00