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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

: (855)330-1010

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2023

## LLC REGISTERED AGENT CHANGE A&A LOCKS AND REPAIR LLC

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JAN 05 2023

## 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.

l. Na	ome of the limited liability company: A&A Loc	ks a	and Rep	pair LLC					
2. (a)			(b) .						
ŕ	Principal office address of limited fiability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)							
	7901 4th St N STE 300	7901 4th St N STE 300							
	St. Petersburg FL 33702	St. Petersburg FL 33702							
	- Ct. 1 Ctc135d1g 1 2 307 02	_		135019 1 L 33702					
	09/10/19		L1900	00230840					
3.	Date of filing/registration in Florida	_ 4.		Document number					
5. (a)	CRUZ, XAVIER A								
	Registered Agent and Registered Office shown on the records of	the Flor	ida Dept. of Stat	e le					
	751 AVENUE C SW			_					
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRE	<u> </u>						
				_					
	WINTER HAVEN FI	, 33	3880	26					
	Northwest Desistant Asset I			2023 JAN					
(b)	Northwest Registered Agent L								
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	address:						
	7901 4th St N								
	NEW Registered Office Address:			2 · · · · · · ·					
	STE 300	···		-: <u>5</u>					
	St. PetersburgFL.	3370	02	_					
the cha agent w was/we	mited liability company is not organized under the layinge or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reability of the 1	gistered office company, it i imited liabilit d liability cor	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in					
Signat	ure of a member or authorized representative of a member			Printed or typed name of signee					
provisit the obli to mere	by accept the appointment as registered agent and agrows of all statutes relative to the proper and complete igations of my position as registered agent as provide aly reflect a change in the registered office address. It is writing of this change.  Taylor Newman - Assistan	perfor d for in hereby	mance of my Chapter 60; confirm that	duties, and I am familiar with and accept 5. F.S Or, if this document is being tiled					

Signature of Registered Agent