5/5/22, 10:47 AM

Division of Corporations

Florida Department of State

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(((H22000162743 3)))



H220001627433ABC.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GOZA AND HALL, P.A.

Account Number : 120000000006 Phone : (727)799-2625 Fax Number : (727)796-8908

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC REGISTERED AGENT CHANGE WOODSONG INTERNATIONAL, LLC

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COVER LETTER

	Registration Section Division of Corporations								
SUBJE	WOODSONG INTERNATIONAL	L, LLC							
SOBIL		Name of Limited Liability Company							
Dear Sir	or Madam:								
The enc	losed Registered Agent/Registered O	ffice Change and	I fee(s) are submitted for filing.						
Please re	eturn all correspondence concerning t	his matter to the	following:						
DONAL	.D R. HALL, ESQ.								
	Name of Person								
GOZA A	AND HALL, PA								
	Firm/Company								
28050 U	.S. HWY. 19 N., SUITE 402								
	Address		<u> </u>						
CLEAR	WATER, FL 33761								
	City/State and Zip Code								
bbrown@	ngozahali.com								
E-1	mail address: (to be used for future ar	nnual report notil	fication)						
For furth	ner information concerning this matte	r, please call:							
DONAI.	D R. HALL, ESQ.	727 at (799-2625						
	Name of Person	at (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						
ı	Enclosed is a check for the followin	g amount:							
i	■ \$25 Filing Fee	□ \$	55 Filing Fee & Certified Copy						
INHS18 ((2/14)								
H2200	00162743 3								

H22000162743 3

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.

١.	Na	ame of the limited liability company: WOODSONG IN	TERN	OITA	NAL, I	rc				
2.	(a)	Principal office address of limited liability company:		(b)_		Mailing a	idress of limi	ited liabilit	y compa	ny:
		(Note: MUST BE STREET ADDRESS) 6741 COMMERCE AVE.		6	741 CC	(<u>Note:</u>)MMERCI	<i>may be po</i> Eave.	<u>OST OFFIC</u>	CE BOX)
		PORT RICHEY, FL 34668		P	ORT R	ICHEY, F				
		11/07/2019		Li	900026	57911				
3.		Date of filing/registration in Florida	4.			Docum	ent number	r		_
5	(a)	SHARON M. HILL								
		Registered Agent and Registered Office shown on the records of the Registered Office Address (MUST BE FLORIDA STREET AGENTAL COMMERCE AVE.			pt. of St	atc:				
		PORT RICHEY, FL	3466	8		_		<u>1</u> *2. :	2022 HAY	
(b)	(b)	MARY BETH TOLAND						`` 	HAY -	.
	(0)	Enter name of NEW Registered Agent and/or NEW Registered		•					5 PH	AMO
		NEW Registered Office Address:			··	_		7	1:3	,
		6741 COMMERCE AVE.						••	0	
		PORT RICHEY, FL	3466	8						
the	ange ent v s/we arti igner ierei ovisi obl	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia tre authorized by an affirmative vote of the members of organization or the operating agreement of the law of a member of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. In	vs of regisability of the limite	the Statered of complimited diab	office a any, it is liability co	ind the bus is hereby ity compa mpany. Her B. Printed of pacific Advances in the pacific Advances in	confirmed ny or as of Thomas typed name	that the cherwise p	register change provide	red (s) ed in
	#	re of Registered Agent								

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