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(1	Requestor's Name)			
	Address)			
(,	Address)			
((City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of S	Status		
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SECRELARY OF STATE

O SIMMON' FEB 2 4 2022

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: PAG C024 Name of Li	Cottage LLC imited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
Demetrios Thermense Name of Person	5			
Firm/Company				
10285 Addison Way, Apt	#1402			
Seminole 1-1 33772 City/State and Zip Code				
Herm 83/48@ g'mail, COM E-mail address: (to be used for future annual rep	2 ort notification)			
For further information concerning this matter, please call:				
Demetrios hermenos at (1/84) 955-5974 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 amount:				
□ \$25 Filing Fee	\$55 Filing Fee & Certified Copy			

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.

i. Na	me of the limited liability company: PAG Cozy Cottag	ae LLC
	,	
2. (a)	(Note: MUST BE STREET ADDRESS)	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 5 Addisanway; # 1402
		1100/e, FL 33712
_		9000212756
3. 5. (a)	Date of filing/registration in Florida 4. Jones A. Kennedy Jr. Registered Agent and Registered Office shown on the records of the Florida Dept. of State	Document number
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 350 MICROR Lake Dr N St. Petersburg, Rd., FL 3370/	2022) SEC TA
(b)	Demotrius Thermonos Enter name of NEW Registered Agent and/or NEW Registered Office address: 10285 Addisin Way, # 1402 NEW Registered Office Address:	FEBIL AN 7:26 REBLIANSSET FL
	Seminole, FL 33772 Seminole .FL 33772	ni o
change agent v was/we	mited liability company is not organized under the laws of the State of Flo or changes are made, the Florida street address of the registered office and vill be identical. Or, in the case of a Florida limited liability company, it is the authorized by an affirmative vote of the members of the limited liability company or the operating agreement of the limited liability com	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
I herel provisi the obl to mere notified	the of a member or authorized representative of a member by accept the appointment as registered agent and agree to act in this capa ins of all statutes relative to the proper and complete performance of my d igations of my position as registered agent as provided for in Chapter 605, illy reflect a change in the registered office address, I hereby confirm that to in writing of this change the of Registered Agent	Printed or typed name of signee