119000279388

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
2.5							

Office Use Only



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10/10/23--01008--017 **145.00

FILE D 2023 OCT 19 EM 7: 03

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	CT: SEAVISTA HOLDINGS LLC Name of Limited Liability Company					
0000						
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.			
Please	return all correspondence concerning	this matter to the	following:			
Andrev	w Pierce					
	Name of Person					
Cindy's	s Florida LLC					
	Firm/Company					
8051 N	N. Tamiami Trail STE E6					
	Address					
Saraso	ta, Florida, 34243					
	City/State and Zip Coo	łe				
•	s@wyomingHeattorney.com					
	E-mail address: (to be used for future	annual report noti	fication)			
For fu	rther information concerning this ma	tter, please call:				
Andre	w Pierce	707 at (300-0042			
	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			
	Enclosed is a check for the follow	ving amount:				
■ \$25 Filing Fee			S55 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	ame of the limited liability company: SEAVISTA HOL	DINGS L	.LC		
2. (a)	8051 N. Tamiami Trail STE E6	(b	8051 N. T	amiami Trail STE E6	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Sarasota, Florida, 34243		Sarasota, I	Sarasota, Florida, 34243	
	11/08/2019		L19000279	9388	
3. 5. (a)	Date of filing/registration in Florida WRZESNIEWSKI, MARTA	4.		Document number	
J. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 18801 N Dale Mabry Highway				
	Registered Office Address (MUST BE FLORIDA STREET) PMB 34605	<u>ADDRESS</u>	<u>.</u>	FILED 2023 OCT 10 CH	
	LUTZ. , FL	33548		FILED	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address: Cindy's Florida LLC			7: 03	
	NEW Registered Office Address: 8051 N. Tamiami Trail STE E6			_	
	Sarasota , FL	34243		_	
change agent was/we the arti	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 liable authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agreement of all statutes relative to the proper and complete	registered ability coof the limited li	ed office an impany, it is ited liability con rew Pierce, in this cap.	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany. Manager Printed or typed name of signee activ. I further agree to comply with the	
notifiei	ions of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I l d'in writing of this change.	d for in C hereby co	Thapter 605 Infirm that	F.S. Or, if this document is being filed the limited liability company has been	
Signatu	re of Registered Agent				