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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
☐ PICK-UP ☐ WAIT ☐ MAIL				
(Business Entity Name)				
(Document Number)				
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D. BRUCE MAY 19 2021

COVER LETTER

TO: Registration Section Division of Corporations	
ARC2 HOLDINGS LLC SUBJECT:	
	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
AHSAN SHAIKH	
Name of Person	
ARC2 HOLDINGS LLC	
Firm/Company	
195 INTERNATIONAL PKWY, SUITE 200	••
Address	——————————————————————————————————————
LAKE MARY, FL 32746	ALL ARASSA
City/State and Zip Code	
sonnyusd@gmail.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, please	e call:
AHSAN SHAIKH	631 487-9818
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 amou	ınt:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

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.

1. N	Same of the limited liability company: ARC2 HOLDING	GS LLC		
2. (a))		(b)	a
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ _	. ,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	195 INTERNATIONAL PKWY, SUITE 200		195 INT	ERNATIONAL PKWY, SUITE 200
	LAKE, MARY, FL 32746		LAKEN	1ARY, FL 32746
	12/05/2019		L1900029	7400
3.	Date of filing/registration in Florida	— 4.		Document number
5. (a	n			20
., (a	Registered Agent and Registered Office shown on the records of ARCI CAPITAL, LP	f the Flor	ida Dept. of S	2021 HAR 15
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			- 5
	195 INTERNATIONAL PKWY, SUITE 200			
	LAKE MARY, F	L 32746		MID 15 AM 7:24 ALLAHASS ASSA
				Fig. 2
(b)			<u> </u>
	Enter name of NEW Registered Agent and/or NEW Registere	d Office	address:	
	AHSAN SHAIKH			
	NEW Registered Office Address:			_
	195 INTERNATIONAL PKWY, SUITE 200	_		<u></u>
				_
	LAKE MARY F	L <u>32746</u> L <u></u>		
chang agent was/v the are Sign I her provi	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members rticles of organization or the operating agreement of the nature of a member or authorized representative of a member rely accept the appointment as registered agent and against of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address. I fed in writing of this change.	e registe iability of the le limited	ered office a company, it imited liability conditions the company of the conditions are t	and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in ompany. Printed or typed name of signee
Signa	ture of Registered Agent			
,	Division of Communication B.O.	Dan C	1974 Tallat	Anggae El 17314