

h20000010394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

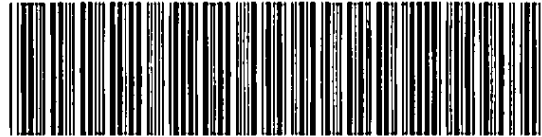
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11/17/21

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2021 NOV 17 PM 3:31
CLERK OF SUPERIOR COURT
TAMM



2021 NOV 17 PM 1:05

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 4, 2021

GLENN MORRIS
PO BOX 1211
FORT MYERS, FL 33902

SUBJECT: RA-HA ENTERTAINMENT GROUP, LLC
Ref. Number: L20000010394

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas
Regulatory Specialist II

Letter Number: 721A00026959

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RA-HA Entertainment Group LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Glenn Morris
Name of Person

RA-HA Entertainment Group LLC
Firm/Company

PO BOX 1211
Address

Fort Myers FL 33902
City/State and Zip Code

SAHEFWARRAH11@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Glenn Morris at (239) 222-0635
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 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.

1. Name of the limited liability company: RA-HA ENTERTAINMENT GROUP LLC

2. (a) 12801 COMMONWEALTH DR. UNIT 12 (b) PO BOX 1217

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Fort Myers FL 33913
(Unit 12)

Fort Myers FL 33902

01-03-2020

03-30-2020

120000010394

3. Date of filing/registration in Florida

4. Document number

5. (a) Glenn Morris

Registered Agent and Registered Office shown on the records of the Florida Dept. of State

PO Box 1211
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Fort Myers

FL 33902

8559
Pegasus Dr
Lehigh Ave, FL

33971

(b) Glenn Morris

Enter name of NEW Registered Agent and/or NEW Registered Office address:

12801 COMMONWEALTH DR.
NEW Registered Office Address:

Unit 12

Fort Myers, FL 33902

FILED
2021 NOV 17 PM 3:31
TALLAHASSEE, FL
SECRETARY OF STATE

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent