K20 000044444

(Requestor's Name)					
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PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Name)				
(Dr	ocument Number)				
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Certified Copies	_ Certificates of	Status			
Special Instructions to Filing Officer:					
J. HORNE					
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Office Use Only



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COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations		
SUBJE	ECT: 211 85TH STREET, LLC		
	N	ame of Limited 1	Liability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered O	ffice Change and	d fee(s) are submitted for filing.
Please	return all correspondence concerning t	this matter to the	e following:
Meliss	sa Jones		
	Name of Person		
ZenBus	siness Inc.		
	Firm/Company		
336 E.	College Ave. Suite 301		
	Address		
Tallaha	issee, FL 32301		
	City/State and Zip Code		
ra@zen	abusiness com		
E	-mail address: (to be used for future a	inual report noti	fication)
For fur	ther information concerning this matte	r, please call:	
Melis	ssa Jones	844 at (493-6249
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee. FL 32314		2415 N. Monroe Street. Suite 810 Tallahassee. FL 32303
	Enclosed is a check for the following	ng amount:	
	□ \$25 Filing Fee	5	\$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. N a	nme of the limited liability company: 211 85TH	ST	REET, L	LC	
2. (a)	211 85TH STREET		(b) PO Box 25944 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
Z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_			
	HOLMES BEACH, FL 34217	_	COLOR	ADO SPRINGS, CO 80936	
	02/06/2020	_		0044444	
3.	Date of filing/registration in Florida	- 4.		Document number	
	Registered Agents Inc.				
5. (a)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of State:		
	7901 4th St N		·		
	Registered Office Address (MUST BE FLORIDA STREET.	4DDRE	(22		
	STE 300			102	
	St. Petersburg , FI	33702		BRUIL-5 HII: 37	
(b)	ZenBusiness Inc			经 五 二	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	336 E. College Ave.			· 3	
	NEW Registered Office Address:				
	Suite 301				
	Tallahassee, FI	,32301			
change agent v was/we	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 ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registe bility of the li	red office and company, it is mited liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
	Gary L. Booth	G	ary L. Boo		
_	ture of a member or authorized representative of a member			Printed or typed name of signee	
I here provisi the obl to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I did writing of this change.	ee to a perfori d for in hereby	ct in this capa nance of my d Chapter 605, confirm that it	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed ae limited liability company has been	
Signatu	re of Registered Agent				