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





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COVER LETTER

TO: Registration Section Division of Corporations	•
PETS AND VETS TRAVEL LLC SUBJECT:	
	mited 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 matte	er to the following:
DENNIS W. MORRIS	
Name of Person	
PETS AND VETS TRAVEL LLC	
Firm/Company	
3440 NE 12TH AVE.	
Address	
POMPANO BEACH, FL 33064	
City/State and Zip Code	
dennismorris10@gmail.com	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	call:
DENNIS MORRIS at (351-2861
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	nt:
■ \$25 Filing Fee	☐ S55 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.

l. Na	ame of the limited liability company: PETS AND VET	'S TRA	VEL.	LLC			
2. (a)	3140 NE 12TU AVE			(b) 3440 NE 12TH AVE			
- . (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)		
	POMPANO BEACH, FL		F	OMPAN	NO BEACH, FL		
	33064		3	3064			
	2-7-2020		L2	0000044	4894		
3.	Date of filing/registration in Florida	4.	_	*	Document number		
5. (a)	UNITED STATES CORPORATION INC						
5. (a)	Registered Agent and Registered Office shown on the records of	f the Flo	orida D	ept. of Sta	ate:		
	Registered Office Address (MUST BE FLORIDA STREET	ADD <u>R</u>	ESS)				
	5575 SOUTH SEMORAN BLVD SUITE 36						
	ORLANDO, FI	L_3282	2		1022F		
(b)	DENNIS MORRIS				2022 FEB 14 SECKE AAR		
` '	Enter name of NEW Registered Agent and/or NEW Registered	d Office	e addr	<u> </u>	TOP STATE TO		
	NEW Registered Office Address:				- 75 5		
	3440 NE 12TH AVE.						
	POMPANO BEACH FI	3306- L	4				
change agent v was/we	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e regis iability of the c limite	tered / comp limite ed liab	office a pany, it d liabili	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.		
Signa	ture of a member or authorized representative of a member	-			Printed or typed name of signee		
provisi the obt to mer	by accept the appointment as registered agent and agions 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 d in writing of this change.	e perto	rman	re of my	eduties, and I am familiar with and accept		
Signatu	re of Registered Agent						