## LRO 0000 45994

(Requestor's Name)				
(Address)				
<b>V</b> -	,			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
<del></del>				
	•			
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	Certificates	e of Status		
Certified Copies	Certificates	s or Status		
Special Instructions to	Filing Officer:			
, ,				

Office Use Only



900340923399

02/24/20--01021--013 \*\*25.00

PILED
2020 FEB 24 AM 9: 5:

RAROCK

MAR 1 8 2020 LALBRITTON

## **COVER LETTER**

•

TO:	Registration Section Division of Corporations				
SUBJE	CFFE Holding, LLC				
	Name of Limited Liability Company				
Dear Si	r or Madam:				
The end	losed Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.		
Please r	return all correspondence concernin	g this matter to the	e following:		
Brian Sa					
	Name of Person				
CFFE H	olding, LLC				
	Firm/Company	· · · · · · · · · · · · · · · · · · ·			
1560 Stl	n St				
	Address	.=			
Clermon	nt, FL 34711				
	City/State and Zip Co	de			
brian@s	urfsaeger.com				
E-	mail address: (to be used for future	annual report noti	fication)		
For furt	her information concerning this ma	atter, please call:			
Brian Sa	ieger	305 at (	962-5368		
	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 follow	ving amount:			
	■ \$25 Filing Fee		555 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: CFFE Holding, L	LLC	
. (a)	1560 5th St. Clermont, FL 34711	(b) 150	60 5th St. Clermont, FI 34711
. (,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	2-10-2020	1.200	)00045994
	Date of filing/registration in Florida	4.	Document number
. (a)	United States Corporation Agents		
. (4)	Registered Agent and Registered Office shown on the records of Ambr	f the Florida Dept	i. of State:
	Registered Office Address (MUST BE FLORIDA STREET) 5575 S Semoran Blvd 36	'ADDRESS)	
	Orlando, F	L 32822	
(b)	Brian K, Saeger  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Brian Saeger	d Office address:	2020 FEB 24 AM 9: 53 SECTION SEPTEMBERS SET TO SELLO
	NEW Registered Office Address:		
	1560 5th Street		
	Clermont, F	L	9: 53 
hange gent v vas/w	imited liability company is not organized under the la cor changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered off iability compar of the limited l	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
Signa	ture of amember of authorized representative of a member		Printed or typed name of signee
rovisi he obl v 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. It is a writing of this change.	ree to act in the performance of for in Chapt hereby confirm	nis capacity. I further agree to comply with the of my duties, and I am familiar with and accep for 605, F.S. Or, if this document is being filed in that the limited liability company has been
Signatu	re of Registers Agent		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00