## h20000054193

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

Office Use Only



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ALL TIASSEE, FLORIDA

2022 JUN 10 PM 6: 05

AUG 2 9 2027

S. PRATHEF

## **COVER LETTER**

	Registration Section Division of Corporations							
SUBJEC	Detail Shop Equipment LLC							
	N	Name of Limited Liability Company						
Dear Sir	or Madam:							
The encl	osed Registered Agent/Registered O	ffice Change and	fee(s) are submitted for filing.					
Please re	turn all correspondence concerning	this matter to the f	following:					
Ana Bett								
	Name of Person	<del></del>	_					
Akin Gro	шр							
	Firm/Company		_					
230 Sunp	ortLane Unit 500							
	Address		<del></del>					
Orlando, I	FI 32809							
	City/State and Zip Code		<del></del> -					
ana@akin	groupusa.com							
E-n	nail address: (to be used for future a	nnual report notifi	cation)					
For furth	er information concerning this matte	r, please call:						
Ana Bett		407 at (	616-6158					
-	Name of Person	at \	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					
ı	allahassee, FL 32314		2415 N, Monroe Street, Suite 810 Tallahassee, FL 32303					
E	aclosed is a check for the followin	ig amount:						
19	\$25 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.	Name of the limited liability company: DETAIL SHOP I	EQUIPM	ENT, LLC		··	
	)					
w. (w)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	'	·	Mailing address of limit	ed liability co	ompany:
	230 Sunport Lane Unit 500 Office 119		230 Sunp	ort Lane Unit 500 Offi	ce 119	
	- Orlando Florida 32809	<del>_</del>	- Orlando	Florida 32809	·	
	02/17/2020		£20000054	1193		
3.	Date of filing/registration in Florida	4.		Document number		
5. (	a)					
- ' '	Registered Agent and Registered Office shown on the records of COMPANY COMBO, LLC	the Florid	la Dept, of Sta	ute:		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES	<u>S)</u>	<del></del>		
	7345 W SAND LAKE RDSTE 210				<del>}.</del>	25
	Orlando , FL	32819		_	}=. }>-	7022 JUN 10 PM
					G (D -	<del>*</del>
(b	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office ac	ddress:	<del></del>	Light Control	MJ 01 Œ≅51.
	Akin LLC	<u> </u>			AHAUSEE FLORID	ڣ
	· · · · · · · · · · · · · · · · · · ·			_	77	Û5
	NEW Registered Office Address: 230 Support Lane Unit 500					
	250 Suitport Came Offic 500		_	<del></del>		
	Orlando . FL	32809				
changagent was/ the a	limited liability company is not organized under the law go or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liawere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the Wilson Regiani Juni	register ability co of the lin limited	ed office an ompany, it i nited liabilit liability con	nd the business office is hereby confirmed to ty company or as oth upany.	e of the reg that the cha nerwise pro	istered ange(s)
	eby accept the appointment as registered agent and agr				-	v with the
provi the o to me	sions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address, I he d in writing of this change.	nertorm	ance of my	duties and Lam Tam	iiliar with i	and accept
C:	Ona Bett					
PiRun	ture of Registered Agent					