(((H210001251913)))



H210001251913ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

**Division of Corporations** 

Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

Account Number: 120090000081 Phone: (307)200-2803 Fax Number: (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:\_\_\_\_\_

MR 29 PM 3-00

## LLC REGISTERED AGENT CHANGE DIVINE AROMAS, LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	02	
Estimated Charge	\$25.00	

MAR 3 0 2021

w. sorðwóй

## 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.

	me of the limited liability company:  420 NE 148TH ST	(b) 4	20 NE 148TH ST		
., _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited l	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	MIAMI, FL 33161		IAMI, FL 33161		
	04/20/20	L2	0000106693		
	Date of filing/registration in Florida	4.	Document number		
1)	REMARAIS, BOYETTE				
(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	11500 N DALE MABRY HWY				
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDRESS)		No.	
	1508	<u></u>	<del>_</del>		
	TAMPA	. FL 33618		0021 HAR 29	
v)	Northwest Registered Ager			714	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	tered Office addres	<u>s</u> :	7 5	
	7901 4th St N			60 :01 #W	
	NEW Registered Office Address:				
	STE 300				
	St. Petersburg	<sub>FI</sub> 33702			

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 Hember or authorized representative of a member

Morgan Noble

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.

Tom Glover - Assistant Secretary
Signature of Registered Agent