L20 000107275

(Re	questor's Name)			
(Ad	dress)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
(Degument Number)				
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COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: THE BottomLess Bas Ket Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Daniel P. Greenfield Name of Person						
The Bottom Less Bas Ket Firm/Company						
3719 W. Wheeler Rd. Address						
City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Dance aventield at (863) 279-7350 Name of Person Area Code & Daytime Telephone Number						
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303						

Enclosed is a check for the following amount:
☐ \$25 Filing Fee

\$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. Na	me of the limited liability company: THE Bo	ttomless.	Basket LLC	
2. (a)	3719 WILLEELR Rd	(b)	3719 W.W.	recler Rol
(")	Principal office address of limited liability company:		Mailing address of limited liab	ility company:
	(Note: MUST BE STREET ADDRESS)	,	(<u>Note: MAY BE POST OF</u> Cateland fl	<u> </u>
	Lake Land Fl.			
	33810		5 <i>5</i> 0	810
	April 20, 2020		12000010	7275
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Hannah L Corcenfield		-	
	Registered Agent and Registered Office shown on the records of the	,	e:	
	Registered Office Address MUST BE FLORIDA STREET AD		-	
	Registred Office Address ISTOST BETEORITA STREET AD	<u>(DKC33)</u>		
	1.11.1	22 BI (-	
	La Keland, FL	33810	-	- 7
(b)	Daniel P. Greenfield			2 AUN ES.2
V	Enter name of NEW Registered Agent and/or NEW Registered O	ffice address:	-	₩ %
	3719 W. Wheeler	01		
	NEW Registered Office Address:	<u>K</u> 0	-	ָּתָּ ברי סדי
				5: 2
		·	-	_
	Lakeland FL	33810	_	
change agent w was/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the regill be identical. Or, in the case of a Florida limited liability re authorized by an affirmative vote of the members of teles of organization or the operating agreement of the limited liability.	gistered office an lity company, it is he limited liabilit nited liability con	d the business office of the shereby confirmed that the y company or as otherwish apany.	e registered he change(s) e provided in
Signar	ure of a member or authorized representative of a member	<u>Han</u>	nah L Green Printed or typed name of sign	tield
Lhorek	we account the approintment as registered agent and garge	to get in this can	wity. I further amon to a	amply with the
provision the oblicito mere	ons of all statutes relative to the proper and complete pe gations of my position as registered agent as provided f iv reflect a change in the registered office address. I her in writing of this change.	rformance of my or in Chapter 605 weby confirm that	luties, ånd I am Jamiliar v , F.S. Or, if this documen he limited liability compa	with and accept at is being filed any has been

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

Signature of Registered Agent