

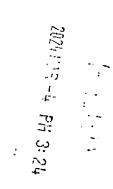
| (Requestor's Name) | | | | | |
|---|------------------|-----------------|--|--|--|
| (Address) | | | | | |
| (Åddress) | | | | | |
| (City | /State/Zip/Phone | • #) | | | |
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| (Bus | iness Entity Nan | ne) | | | |
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COVER LETTER

| TO: | Registration Section Division of Corporations | | | | | |
|-----------|--|---|--|--|--|--|
| SUBJF | Heritage Hill Shave Company, I | Heritage Hill Shave Company, LLC Name of Limited Liability Company | | | | |
| | | | | | | |
| Dear Si | r or Madam: | | | | | |
| The end | closed Registered Agent/Registered | Office Change | and fee(s) are submitted for filing. | | | |
| Please | return all correspondence concernin | g this matter to | the following: | | | |
| Jeffrey ! | D. Harper, Esq. | | | | | |
| | Name of Person | | _ | | | |
| The Lav | v Office of Jeffrey D. Harper, PLLC | | | | | |
| | Firm/Company | | | | | |
| 3450 D | unn Avenue, Suite 302 | | | | | |
| | Address | <u></u> | | | | |
| Jackson | ville, Florida 32218 | | | | | |
| _ | City/State and Zip Coo | de | | | | |
| jeff.harp | er@harperlawpllc.com | | | | | |
| E | -mail address: (to be used for future | annual report r | notification) | | | |
| For fur | ther information concerning this ma | tter, please call | | | | |
| Jeffrey | D. Harper, Esq. | 904 at (| 647-6949 | | | |
| | 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 | ring amount: | | | | |
| | ■ \$25 Filing Fee | C | ☐ \$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.

| l. Na | nme of the limited liability company: Heritage Hill Sha | ave Comp | oany, LLC | |
|---|--|--|---|---|
| 2. (a) | | (| b) | |
| ` ' | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | 33227 Tupelo Lane, Callahan, Florida 32011 | | 33227 Tu | upelo Lane, Callahan, Florida 32011 |
| | 6/1/2020 | | L2000014 | 8506 |
| 3. | Date of filing/registration in Florida | 4. | | Document number |
| 5. (a) | Registered Agent and Registered Office shown on the records of UNITED STATES CORPORATION AGENTS, INC. | f the Florid | | |
| | Registered Office Address 476 RIVERSIDE AVE. | 7024 HAR | | |
| | Jacksonville, F | L_32202 | | |
| (b) | The Law Office of Jeffrey D. Harper, PLLC | | | |
| | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u> | d Office a | ddress: | 24 |
| | NEW Registered Office Address: | | | |
| | 3450 Dunn Avenue, Suite 302 | | | <u> </u> |
| | Jacksonville, F | L_32218 | | <u> </u> |
| change agent v was/we the_arti | imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited learn authorized by an affirmative vote of the members icles of organization or the operating agreement of the shua Dye | e register iability control of the line in ted | red office a ompany, it nited liabil | ind the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in |
| Signa | ture of a member or authorized representative of a member | | | Printed or typed name of signee |
| provisi the obl to mere notified Jeff | by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provided verteet a change in the registered office address. If the writing of this change in the provided in the registered of the address. If the writing of this change in the registered of the per happen agent with the provided in the provid | ree to ac perforn ed for in hereby c | et in this ca nance of my Chapter 60 confirm tha | pacity. I further agree to comply with the v duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been |

eSignature Details

Signer ID: Signed by: Sent to email: **3ryuiWZXVnXhCPSJ1vLQ67nn** Josh Dye

joshdye77@gmail.com 76.209.90.62

IP Address:

Signed at: Feb 23 2024, 11:20 pm EST

Q9EpaZE5wqmXhxJp8nVAYiEa Jeffrey Harper jeff.harper@harperlawpllc.com 104.28.39.142 Signer ID: Signed by: Sent to email:

IP Address:

Signed at: Feb 23 2024, 11:21 pm EST