Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 : (561)694-8107 Phone Fax Number : (561)214-8442

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Email Address:

LLC REGISTERED AGENT CHANGE PHERIAN TEXAS, LLC

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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.

i.	Na	me of the limited liability company: PHERIAN TEXA	S. LL	.C		
2. (in	4813 N. Manhattan Ave		(b	4813 N	. Manhattan Ave
∠. (uy	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite A			Suite A	
		TAMPA, FL 33614			TAMPA	A, FL 33614
		06/09/2020			L2000015	2523
3.		Date of filing/registration in Florida	4.	-		Document number
5. ((a)	BREWER, CHRISTOPHER				
J. (a)	(u)	Registered Agent and Registered Office shown on the records of	the Flo	orida	Dept. of St	ate:
		4813 N MANHATTAN AVE SUITE A				swa
		Registered Office Address (MUST BE FLORIDA STREET)	ADDR	ESS	2	2020 OCT
						OCT
		TAMPA	3361	4		
(b)			<u> </u>			- P . 1
	b)	Corporate Creations Network Inc.				ـــ
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Offic	e ade	<u>dress</u> :	
		801 US Highway 1				
		NEW Registered Office Address;				
		North Palm Beach	3340	8		
char ager was	nge nt v /w/	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of these of organization or the operating agreement of the	ws of regis ability of the	the tere co: lim	d office a mpany, it ited liabil	ind the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
		aitlin Lazarus				s, Attorney-in-Pact
		ture of a member or authorized representative of a member	-			Printed or typed name of signee
pro the to n	visi obl igre	by accept the appointment as registered agent and agi ions 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, I d'in writing of this change.	ree to perfo d for hereb	act rma in C y co	in this ca ince of m hapter 66 onfirm tha	pacity. I further agree to comply with the y duties, and I am familiar with and accept 15, F.S. Or, if this document is being filed I the limited liability company has been
		<u>aitlin Lazarus</u> <u>Caitlin Lazarus, Sp</u> eci	al Se	CLE	etary	