420 000 186445

(Requestor's Name)				
(Address)				
(Address)				
(Cil	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Dc	ocument Number)			
(3.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



500356524995

50035652499 12/29/20--01025--008 ##25.00

12/28/28--01025--008 ++25.00

TO DEC 29 PH 3: 07
SECRETARY OF STATE

2/10/21 On

COVER LETTER

то:	Registration Section Division of Corporations							
SUBJ	Thinking Of The Sea LLC							
	Name of Limited Liability Company							
Dear S	Sir or Madam:							
The er	nclosed Registered Agent/Registered Off	ice Change	and fee(s) are submitted for filing.					
Please	return all correspondence concerning th	is matter to	the following:					
Alina	Trigub		′					
	Name of Person							
Think	ing Of The Sea LLC							
	Firm/Company							
233 F	Rock Road, #316							
	Address							
Glen	Rock, NJ 07452							
	City/State and Zip Code	· · · · · ·						
alina_	_trigub@yahoo.com							
F	E-mail address: (to be used for future ann	ual report n	otification)					
For fu	rther information concerning this matter,	please call:						
Alina	Trigub	201	281-7430					
	Name of Person	" (Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
	Enclosed is a check for the following	amount:						
	\$25 Filing Fee	Q	\$55 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. Na	ame of the limited liability company: THINKIN	NG OF THE SEA LIMITED LIA	BILITY COMPANY		
2. (a)	16711 Collins Ave Apt PH01	(b) 233 Roc	(b) 233 Rock Road, #316		
2. (a)	Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	pany:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Sunny Isles, FL 33160	Glen Ro	ck, NJ 07452		
	5/5/20	1. 71	CREMIX LLIMS		
3.	Date of filing/registration in Florida	4.	Document number		
F ()	Anderson Registered Agents, Inc				
5. (a)	Registered Agent and Registered Office shown on the r	records of the Florida Dept. of State	- e:		
	12001 Research Parkway, Suite 236-	-K			
	Registered Office Address (MUST BE FLORIDA)	STREET ADDRESS)	-		
			202 Se		
	Orlando	. FL 32826	2020 DEC SECRETALLA		
(b)	Joseph Soybelman		14/8 × 14/9		
(/	Enter name of NEW Registered Agent and/or NEW I	Registered Office address:	SET S		
	16711 Collins Ave, Apt PH01		PH 3: 07 OF STATE SKET, FI		
	NEW Registered Office Address:		-		
	Supply Islan	33160	-		
	Sunny Isles	, FL	_		
the cha agent was/w	imited liability company is not organized undange or changes are made, the Florida street adwill be identical. Or, in the case of a Florida lere authorized by an affirmative vote of the micles of organization or the operating agreement.	ddress of the registered office imited liability company, it is sembers of the limited liability control the lia	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in		
Signa	ture of a member or authorized representative of a member	Alina Trigub	Printed or typed name of signee		
I here provisi the obi to mer	hy accept the appointment as registered agentions of all statutes relative to the proper and cligations of my position as registered agent as elv reflect a change in the registered office add in writing of this change.	t and avree to act in this can	acity. I further agree to comply with the		
Signatu	re of Registered Agent				