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To:					· • •
	Division of Corporations				
		: (850)617-6383	1 1	2021	
From:			LAHASS	NDF	
		: REGISTERED AGENTS INC.	(1)	24	7
	Account Number	: 12009000081	()^ []-	그	, <u> </u>
	Phone	: (307)200-2803	$\mathbb{P}_{\mathbb{C}}$	ω.	in .
	Fax Number	: (855)330-1010	- 10 - 15 - 15	AH	0
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*Enter the	email address for	this business entity to be used for futur	. <u>#</u>		
annual	report mailings.	Enter only one email address please.**	رباري جر	0	

Email Address:

6/3/2021

## LLC REGISTERED AGENT CHANGE **TUBOTTEGA 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.

L. N	ame of the limited liability company: TUBOTT	EGA	A LLC				
2. (a)	3901 NW 79TH AVE	(	<sub>ы</sub> 3901 Г	NW 79TH AVE			
	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )	_ `	·	Mailing address of limited (Note: MAY BE POST	-	• •	····
	SUITE 245 #1772		SUITE	245 #1772			
	MIAMI, FL 33166	_	MIAMI,	FL 33166			
	07/07/2020		L20000	193174			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	LEGALINC CORPORATE SERVICES INC.						
	Registered Agent and Registered Office shown on the records of t	 he Florid	a Dept. of Stat	e:			
	5237 SUMMERLIN COMMONS						
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>\$)</u>	-	ĨA.	<b>~</b> 3	
	SUITE 400					1651	
	FORT MYERS	3390	7	_	AHASSE	2021 JUN - 3	
(b)	Registered Agents Inc.				U.C.	-3 AH	ED
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	ldress:	_	с С	с; Ц	
	7901 4th St N				r STATE FLONDA	10	
	NEW Registered Office Address:			-			
	STE 300			_			
	St. Petersburg, FL	3370	2	-			
the chi agent v was/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cless of organization or the operating agreement of the l	the regi bility c the lin	stered office ompany, it i uted liabilit	e and the business off s hereby confirmed th v company or as other	ice of the nat the ch	e regis ange(a	tered
Riber tark.			ey Park				
	ture of a member or authorized representative of a member			Printed or typed name of	-		
I here provisi	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete r	e to ac	t in this cap	acity. I further agree	to comp	ly 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.

Dec Marre	Bill Havre	<ul> <li>Assistant Secretary</li> </ul>
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Signature of Registered Agent

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