L20 000 223034

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/2ip/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document value)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400380310564

2022 JAN 28 AM 7: 48 SECKLIARY OF STATE TALLAHASSEE, FL

FEB 10 2022

I ALBRITTON

	COVER LETTER
TO: Registration Section Division of Corporations	
SUBJECT: (entral Shore	es CCC
Name	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Hudson Theus	
Name of Person	
Central Shores L Firm/Company	-66
9200 Bouquet Rd Address	
City/State and Zip Code	167
hudsonjb16@icle E-mail address: (to be used for future annua	oud.com
For further information concerning this matter, pl	•
Hudson Theus Name of Person	at (561) 877 0916 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 following as	mount:

□ \$55 Filing Fee & Certified Copy

S25 Filing Fee

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.

	ime of the limited liability company: Central Shores LCC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) 9200 Bo 1700 F Cd, Lake Worth, Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	<u>FL</u> 3
2	01/26/2022	
3. 5. (a)	Date of filing/registration in Florida Hudson Theus Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 7901 4th 5th Ste 300 5thetersburg, FL 33702 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	7901 4th st N Ste 300 St. Petersburg, FL 33702	
(b)	Hudson The S Enter name of NEW Registered Agent and/or NEW Registered Office address:))
	NEW Registered Office Address: 9200 Borgret Rd. Lake Worth EL 33467	
change agent v was/we	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cless of organization or the operating agreement of the limited liability company.	
Signa	ture of a member or authorized representative of a member Printed or typed name of signee	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply 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.

Christen Signature of Registered Agent