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(Requestor's Name)								
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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	CCT: ADRIAN MARIEL ANDER	SON LLC				
	N	ame of Limited L	iability Company		_	
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered C	office Change and	fee(s) are submitted for filing.			
Please	return all correspondence concerning	this matter to the	following:			
Meliss	a Jones					
	Name of Person		_			
ZenBus	iness Inc.			r	21	
	Firm/Company		<u> </u>	7.	022 JL	٠- ت
336 E.	College Ave. Suite 301			PALLAHASSEE, FL	7 - 5	, , , , , ,
	Address			SSE	PH	g e i
Tallaba	ssee, FL 32301			門の一門的	<u>ယ</u> —	
	City/State and Zip Code		····		C)	
ra@zeo	business.com					
E	mail address: (to be used for future a	nnual report notif	cation)			
For fur	ther information concerning this matte	er, please call:				
Melis	ssa Jones	844 at (493-6249			
	Name of Person		Area Code & Daytime Telephon	e Numi	ber	
	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 Tallahassee. FL 32303	810		

☐ \$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

☐ \$25 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.

1. N :	ame of the limited liability company: ADRIAN M	IARI	EL ANI	DERSON	N LLC	
2. (a)	2525 SOUTH MONROE STREET		·	SYKESI		· · · · · · · · · · · · · · · · · · ·
(_)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	. (0		Mailing address of (Note: MAY B)	f limited liabil	
	20		TALLA	AHASSE	E, FL 3	32305
	TALLAHASSEE, FL 32301	_				
	07/28/2020		L20000	0223088		
3. 5. (a)	Date of filing/registration in Florida Registered Agents Inc.	4.	1	Document nun	nber	· <u> </u>
` '	Registered Agent and Registered Office shown on the records of the 7901 4th St N	Florida	Dept. of State:	:		
	Registered Office Address (MUST BE FLORIDA STREET AD. STE 300	DRESS			ZUZZ JUL 15	ومنتها
	St. Petersburg, FL_33	3702			FALLAHASSEE.	<u> </u>
(b)	ZenBusiness Inc				PH SSEE	i Pi
(0)	Enter name of NEW Registered Agent and/or NEW Registered Of	fice add	ress:		<u>ن</u> ب	
	336 E. College Ave.				· = 5	
	NEW Registered Office Address:					
	Suite 301					
	Tallahassee , FL 32	301				
agent w was/we the arti-	mited liability company is not organized under the laws of changes are made, the Florida street address of the regull be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of the cles of organization or the operating agreement of the limited liability.	gistered ity con he limit	l office and ipany, it is l ed liability	the business o hereby confirm company or as	office of the	registered
	Adrian M Anderson	Adr	ian M Ar			
I herel provision the oblit to mere notifica	we of a member or authorized representative of a member by accept the appointment as registered agent and agree to cons of all statities relative to the proper and complete per gations of my position as registered agent as provided for gations of my position as registered agent as provided for gations of the proper and complete per gations of the proper address, I here gation writing of this change.	to act i formar ir in Ch eby cor	n this canac	Printed or typed of ity. I further a sties, and I am F.S. Or, if this e limited liabi	amaa ta ca	manda, a miala ala a