L20000271141

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

	istration Section ision of Corporations					
SUBJECT:	FORMARC GROUP LLC					
SUBJECT:	Name of Limited Liability Company					
Dear Sir or	Madam:					
The enclose	d Registered Agent/Registered Office Char	nge an	nd fee(s) are submitted for filing.			
Please return	n all correspondence concerning this matte	r to th	e following:			
LOVETTE	DOBSON					
	Name of Person					
INCFILE.CO		<u>.</u>				
	Firm/Company					
17350 STAT	TE HWY 249 STE 220					
	Address					
HOUSTON,	TX 77064					
	City/State and Zip Code					
EFILE1234@	@INCFILE.COM					
E-mai	l address: (to be used for future annual repo	ort not	dification)			
For further	information concerning this matter, please	call:				
LOVETTE	OOBSON 8	888	462-3453			
	Name of Person		Area Code & Daytime Telephone Number			
Reg Div P.C	gistration Section vision of Corporations D. Box 6327 Hahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enc	closed is a check for the following amoun	ıt:				
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy			
INHS18 (2/1	4)					

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: FORMARC GR	OUP LLC	: 			
2. (a)			(b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	5600 N. FEDERAL HWY		5600 N. FEI	DERAL HWY		
	FORT LAUDERDALE, FL 33308		FORT LAU	DERDALE, FL 33308		
	08/31/2020		1.2000027114	-1		
3.	Date of filing/registration in Florida	4.	[Document number		
5. (a)						
5. (a)						
	VINCENT MARCHESE					
	egistered Office Address (MUST BE FLORIDA STREET ADDRESS)			2028		
	5600 N. FEDERAL HWY			000		
	FORT LAUDERDALE, F	L_33308	DDRESS) 200 - 1 - 1 - 2 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3			
(b)	Enter name of NEW Registered Agent and/or NEW Registere	AMII: 12 OF STATE SEE, FL				
	VINCENZO MARCHESE			tr: 1 0		
	NEW Registered Office Address:					
	5600 N. FEDERAL HWY					
	FORT LAUDERDALE	L 33308				
change agent v was/we the arti	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the member of a mem	e registe iability c of the line limited	red office and ompany, it is in nited liability liability comp NCENT MARC	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
•	site. I fouther comes to complement the					

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 he obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed o merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been sotified in writing of this change.

Signature of Registered Agent