120000287923

(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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SECTION 1 SECTION 1

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C. BRUMBLEY

COVER LETTER

то:	Registration Section Division of Corporations	•		√ A · · · · · · · · · · · · · · · · · · ·							
SUBJE	The Builder Babes LLC										
	Name of Limited Liability Company										
Dear S	ir or Madam:										
The en	closed Registered Agent/Register	ed Office Chan	ge and	fee(s) are submitted for filing.							
Please	return all correspondence concerr	ning this matter	to the f	Ollowing:							
Alyssia	M. Deutsch										
	Name of Person			_							
The Bu	ilder Babes LLC										
	Firm/Company			_							
301 SW	1st Avenue, Apt 2419										
	Address			_							
Fort La	uderdale, FL 33301										
	City/State and Zip C	Code		-							
thebuild	lerbabesllc@gmail.com										
Е	-mail address: (to be used for futu	ire annual repoi	rt notifi	cation)							
For fur	ther information concerning this r	natter, please c	all:								
Alyssia	M. Deutsch	at (570	228 - 0172							
	Name of Person			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 foll	owing amount	:								
	■ \$25 Filing Fee		☐ \$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. N	lame of the limited liability company: The Builder Babe	s LLC			_ _	<u>.</u>				
2. (a)	·		(b)	_						
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			•	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) st Avenue, Apt 2419					
	301 SW 1st Avenue, Apt 2419		301 SV	V 1st Avenue, Apt 2						
	Fort Lauderdale, FL 33301		Fort Lauderdale, FL 33301							
	09/14/2020		L200003	287923						
3.	Date of filing/registration in Florida	- 4.		Document nu	mber					
5. (a)									
<i></i> (u	Registered Agent and Registered Office shown on the records of KELSEY S. GERKS	the Flor	ida Dept. of	State:						
	Registered Office Address (MUST BE FLORIDA STREET.	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)								
	2230 LAKE WORTH RD, APT 312			~						
	LAKE WORTH, FL	33461	•—		: آب جا	2021 OCT 25				
					-	77 2				
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:		25 Voc		**************************************			
	The hane of Any Registered Agent and of State Registered	Onice	audi ess.		(1)	AM 10:				
	ALYSSIA M. DEUTSCH					0: 2	\cup			
	NEW Registered Office Address:				•	ğ	5			
	301 SW 1ST AVE. APT 2419						8			
	FORT LAUDERDALE, FI	33301								
chang agent was/v	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liawere authorized by an affirmative vote of the members of ticles of organization of the operating agreement of the	registe ability of the I limited	ered office company, imited liab	and the business it is hereby confir oility company or a company.	office of the med that t	he regis he chan	tered ge(s)			
Sign	ature of agreember or authorized representative of a member	^	198814 141. 15	Printed or typed	name of sign	nee				
l hero provis the ob to me notific	ehv accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I to ed in writing of this change.	perfor.	mance of r	capacity. I further ny duties, and I ar	r agree to c m familiar	comply with an	d accept			