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COVER LETTER

TO:	Registration Section Division of Corporations		•		
SUBJE	CT: Estil LLC	,			
	1	Name of Limited Li	iability Company		
Dear Si	r or Madam:				
The end	closed Registered Agent/Registered (Office Change and	fee(s) are submitted for filing.		
Please r	eturn all correspondence concerning	this matter to the	following:		
Jhan	ese Hoosain				
	Name of Person				
ZenBusi	iness Inc.				
	Firm/Company	 			
336 E. C	College Ave. Suite 301				
	Address				
Tallahas	ssee, FL 32301				
	City/State and Zip Cod	ie			
ra@zenl	business.com				
E-	mail address: (to be used for future	annual report notifi	ication)		
For furt	her information concerning this mat	ter, please call:			
Jhane	ese Hoosain	844 at (493-6249		
	Name of Person		Area Code & Daytime Telephone Number		
	Mailing Address:		Street Address:		
	Registration Section		Registration Section		
	Division of Corporations		Division of Corporations		
	P.O. Box 6327		The Centre of Tallahassee		
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the follow	ing 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	Tame of the limited liability company: Estil LLC						
2. (a)	515 East Las Olas Boulevard	U	√515 E	Las Olas E	3oulev	ard	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	·——	ailing address of limite (Note: MAYBE POS	ed liability o	company:	
	Suite 120		Suite 1	120			
	Fort Lauderdale, FL 33301	_	Fort La	auderdale,	FL 33	301	
	09/21/2020		L20000	0295892			
3.	Date of filing/registration in Florida	4.	I	Document number			
5. (a	Vildor, Nitshell K						
J. (-	Registered Agent and Registered Office shown on the records of the	be Florida	Dept. of State:				
	7527 SW 6TH ST						
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	ភ		<u> </u>	2022	
						g SEP	
	NORTH LAUDERDALE,FL 33068					F: -3	<i>.</i> -
(b)	ZenBusiness Inc.						1
	Enter name of NEW Registered Agent and/or NEW Registered	dress:		9 .7	2: [
	336 E. College Ave. Suite 301			1,	ւ5		
	NEW Registered Office Address:						
	Tallahassee	32301					
	, FL		 				
chang agent was/v	limited liability company is not organized under the law ge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the l	register bility co f the lin	ed office and impany, it is nited liability	the business office hereby confirmed to company or as oth	e of the re that the cl	gistered nange(s)	
	/s/ Jeffrey B Williams JR	Je		illiams JR			
Signature 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

Signature of Registered Areas