## L20000303763

(Requestor's Name)					
(Address)					
(					
(Address)					
(City/State/Zip/Phone #)					
_					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Littly Name)					
(Document Number)					
Certified Copies Certificates of Status					
<u></u>					
Special Instructions to Filing Officer:					
J DENNIS					
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Office Use Only



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SHIEGIARY OF STATE

## **COVER LETTER**

	Registration Section Division of Corporations			
SUBJE	FERROS BRANDS LLC			
	Name of Limited Liability Company			
Dear Si	r or Madam:			
The enc	closed Registered Agent/Registered Office Ch	hange and fee(s) are submitted for filing.		
Please r	return all correspondence concerning this matt	tter to the following:		
GUILLI	ERMO ARENA			
	Name of Person			
CONCO	ORD AG LLC			
	Firm/Company	<del></del>		
5738 SU	UNSET DR			
	Address			
SOUTH	I MIAMI, FL 33143			
	City/State and Zip Code	<del></del>		
GNARE	ENA@GMAIL.COM			
E-	-mail address: (to be used for future annual re	eport notification)		
For furt	ther information concerning this matter, please	se call:		
GUILLI	ERMO ARENA	786 6269377		
	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 following amou	ount:		
	■ \$25 Filing Fec	☐ \$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	ame of the limited liability company: FERROS BRAN	DS LLC		
2. (a)	7345 W SAND LAKE RD	(b) 7345 W SAND LAK	E RD	
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing addr	ress of limited liability company: AY BE POST OFFICE BOX)	
	STE 210 OFFICE 3114	STE 210 OFFICE 311	14	
	ORLANDO, FL 32819	ORLANDO, FL 32819		
	09/25/2020	1.20000303763		
3.	Date of filing/registration in Florida	4. Documen	t number	
5. (a)	TAXFIVE LLC			
. (.,	Registered Agent and Registered Office shown on the records of 4319 DOGWOOD CIR	the Florida Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
	WESTON, FI	L 33331	<b>20</b> <i></i>	
(b)	CONCORD AG LLC		FIL SPIRETARY <b>2023</b> JUL 25	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office address:	FIL 25	
	5738 SUNSET DR		PH	
	NEW Registered Office Address:		PM 12: 12	
	SOUTH MIAMI , FI	L 33143		
change agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	e registered office and the busir ability company, it is hereby co of the limited liability company	ness office of the registered onfirmed that the change(s)	
	SAGEZISEC (PELECE)	ELIEZER FERRO		
I here provis the ob- to mer	ture of a member or authorized representative of a member  by accept the appointment as registered agent and agent ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I din writing of this change.  Guillermo Arena  are of registered Agent	ree to act in this canacity. I fin	typed name of signee  If ther agree to comply with the  I am familiar with and accept  if this document is being filed  I liability company has been	