## L20000348965

(Re	equestor's Name)	
(Ad	ldress)	<del></del>
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(Cil	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	·
Certified Copies	Certificates of	Status
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Special Instructions to	Filing Officer.	
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Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations	·		
Deborah Freed LLC SUBJECT:			
N	lame of Limited L	iability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered C	Office Change and	fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the	following:	
Deborah Freed			
Name of Person		<del></del> -	
Deborah Freed LLC			
Firm/Company		_ <del></del>	
594 Batten Blvd			2021
Address		<u> </u>	7024 SEP 30 MM 9: 58
Pensacola, FL 32507		·,	3
City/State and Zip Code		<u> </u>	SSE E
debisellsparadise@yahoo.com			(N) 55 55 55 55 55 55 55 55 55 55 55 55 55
E-mail address: (to be used for future a	innual report notif	ication)	<b></b>
For further information concerning this matt	er, please call:		
Deborah Freed	850 at (	261-1554	
Name of Person		Area Code & Daytime Telephone Nun	aber
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 followi	ng amount:		
\$25 Filing Fee	<b>□</b> \$.	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.

l. Na	ame of the limited liability company: Deborah Freed Li	LC					
			(b)				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		` ,		-	ess of limited liability comp IY BE POST OFFICE BO	•
	594 Batten Blvd			594 Batt	en Blvd		
	Pensacola, FL 32507			Pensacol	la, FL 32507		-
	11/03/2020		Ļ	.2000034	18965		
3.	Date of filing/registration in Florida	4.	_		Document	number	
5. (a)							
J. (11)	Registered Agent and Registered Office shown on the records of	the Flo	rida l	Dept. of St	tate:		
	Hale and Doerr LLC						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRI	ESS			~-	
	913 Gulf Breeze Pkwy, Ste 13					024	
	Gulf Breeze , FL	32561	1	- <u>-</u>		2024 SEP 30 TALLAHA	
(b)	Deborah Freed Enter name of NEW Registered Agent and/or NEW Registered	Office	add	ress:		SEP 30 AM 9: 58	
	594 Batten Blvd. NEW Registered Office Address:					9: 58	
	Persacola	2 (	· ·	n 7	_		
	,FL	. <u>. 5 o</u>	<u>( )</u>	0 1	_		
change agent v was/we the arti  Signal  I herei provisi the oblito mere	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law of a member or authorized representative of a member observed the appointment as registered agent and aground of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have thing of this change.	regist ability of the l limite —	erec con limit d lia	office a pany, it ed liabil bility co	ind the busine is hereby corlity company ompany.  Oracle Printed or ty	ess office of the registorification of the change or as otherwise provide the change of signee the complete there agree to complete the	ered e(s) led in

Signature of Registered Agent