nent of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000222369 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : FILE RIGHT LLC Account Number : I20170000091 : (718)878-5811 Fax Number : (718)732-4580

. 변경 annual	email address for this business entity to be used for future report mailings. Enter only one email address please.**
OF STAN	Address:
#355 255 255 255 255 255 255 255 255 255	LLC REGISTERED AGENT CHANGE

mail Address:_

LLC REGISTERED AGENT CHANGE	
TALLAHASSEE REALTY HOLDINGS LL	•

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Corporate Filing Menu

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K. SALY

JUN 2 8 2024

COVER LETTER

H240002223693

TO: Registration Section
Division of Corporations

SUBJECT:	TALLAH	ASSEE	REALTY	HOLDINGS	LLC

Name of Limited Liability Company

Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change ar	nd fee(s) are submitted for filing.
Please return all correspondence concerning this matter to th	e following.
Mark Fuchs	
Name of Person	
File Right RA Services, LLC	
Firm/Company	
1425 37th Street, Suite 201	
Address	<u>-</u>
Brooklyn, NY 11218	
City/State and Zip Code	
agent@fileacorp.com	<u></u>
E-mail address: (to be used for future annual report not	ification)
For further information concerning this matter, please call.	
Sara Ringel 718 at (878-5811)
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 following amount:

■ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

H240002223693

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: TALLAHASSE	E REALTY	HOLDINGS LLC
2 (a)	Mendel Steiner	(b)	
2 . (w)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	4403 15 AVE STE 192		
	BROOKLYN, NY 11219		
3.	11/16/2020		L20000351585
	Date of filing/registration in Florida	4.	Document number
5. (a)	Business Filing Incorporated		
J. (a)	Registered Agent and Registered Office shown on the records of the	he Florida Dep	t, of State:
		•	
	1200 South Pine Island Rd, Plantation, FL 33326	INDARCCI.	
	Registered Office Address (MUST BE FLORIDA STREET A	Phyeron	TALLANASSEE FLOSIO
			おって
	·		
			量。
(b)		000	<u> </u>
	Enter name of NEW Registered Agent and/or NEW Registered	Utilee aggress	
			Ξ_{i}
	625 E Twiggs Street, Ste. 110		
	NEW Registered Office Address:		
			
	Tampa, FL 33602		
change agent v was/we	imited 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 liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	registered of bility compa f the limited	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
/s/	Mark Fuchs	Mark Fu	chs, Authorized Person
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obl to mer notified	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change. Mark Fuchs	ee to act in the performance I for in Chap ereby confir	his capacity. I further agree to comply with the of my duties, and I am familian with and accept ter 605, F.S. Or, if this document is being filed in that the limited liability company has been
	re of Registered Agent		H240002223693