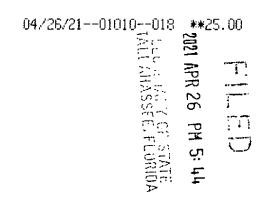
## LZ0000352988

(Requestor's Name)					
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(Cit	ty/State/Zip/Phone	· #)			
PICK-UP	WAIT	MAIL			
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## **COVER LETTER**

TO: Registration Section Division of Corporations	· ·			
SUBJECT: Najalux Creek LLC	mited Liability Company			
Name of El	anted Elabinty Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter	r to the following:			
Najalux				
Name of Person	<del></del>			
Najalux Creek LLC				
Firm/Company				
1317 Edgewater Dr. #1936				
Address				
Orlando, FL 32804				
City/State and Zip Code	····			
najaluxcreek@gmail.com				
E-mail address: (to be used for future annual rep	ort notification)			
For further information concerning this matter, please	call:			
Najalux at (	1-800 ) 000-000-001			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			
Tallahassee, Florida 32301				
Enclosed is a check for the following amount:				
☑ \$25 Filing Fee	S55 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.

i. N	ame of the limited liability company: NAJALUX CF	REEK LLC	
2. (a)		(b)	NAJALUX CREEK LLC
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1317 EDGEWATER DR #1936		1317 EDGEWATER DR #1936
	ORLANDO, FL 32804 US		ORLANDO, FL 32804 US
	11/06/2020		L20000352988
3.	Date of filing/registration in Florida	4.	Document number
5. (a	REGISTERED AGENTS INC.		
). (a	Registered Agent and Registered Office shown on the records of t	he Florida Dept	. of State;
	7901 4TH ST N STE 300, ST. PETERSBURG, F	FL 33702 US	
	Registered Office Address (MUST BE FLORIDA STREET A	IDDRESS)	<del></del>
7901 4TH ST N STE 300, ST. PETERSBURG,		L 33702 US	7 2
	, FL		2021 APR 26
(b)	Kelly Miller		R 26
` · · —	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	6 PH
			PH 5: 44 PELORIDA
	1317 Edgewater Dr  NEW Registered Office Address:		
	<u>ADA</u> Registere Office Health.		
	Orlando . FL	32804	
he ch igent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of ticles of organization of the prograting agreement of the	the registered bility compa f the limited	d office and the business office of the registere ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
Sign	ature of a member or authorized epresentative of a member		Printed or typed name of signee
provis the ob- to men notifie	eby accept the appointment as registered agent and agrasions of all statutes relative to the proper and complete digations of my position as registered agent as provided rely reflect a change in the registered office address. I have a change in the registered office address. I have a change in the registered of the change.	ee to act in the performance of the for in Chap. wereby confired to the confired to the following th	his capacity. I further agree to comply with the of my duties, and I am familiar with and accep ter 605, F.S. Or, if this document is being filed m that the limited liability company has been
Signat	ure of Registered Agent		