## L20 000353203

(Requestor's Name)				
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(City/State/Zip/Phone #)				
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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				
SUBJ	ECT: VALIBERRY LLC				
	Name of Limited Liability Company				
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.			
Please	return all correspondence concerning the	nis matter to the following:			
	Valiberry				
	Name of Person				
	Valiberry LLC				
	Firm/Company				
	1317 Edgewater Dr, #697				
	Address				
	Orlando, FL 32804				
	City/State and Zip Code				
	valiberrybuyer3@outlook.com				
I	E-mail address: (to be used for future an	nual report notification)			
For fu	rther information concerning this matter	, please call:			
	Valiberry	at ( 1-800 ) 000-000-001			
	Name of Person	Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
	Enclosed is a check for the following amount:				
	■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy			

## 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: VALIBERRY LL	.c	
2. (a)	1/44 (5 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	(b)	VALIBERRY 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 #697		1317 EDGEWATER DR #697
	ORLANDO, FL 32804 US	<del></del>	ORLANDO, FL 32804 US
	Nov 06, 2020		L20000353203
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	REGISTERED AGENTS INC.		
	Registered Agent and Registered Office shown on the records of the	he Florida Dept.	of State:
	7901 4TH ST N STE 300, ST. PETERSBURG, F	L 33702 US	57. 52
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	——
	7901 4TH ST N STE 300, ST. PETERSBURG, F	L 33702 US	2021 APR 26
	, FL		MPR 26 PH 5: 4 Aliassee. Florid
	, , , L,		
(b)	Kelly Miller		
	Enter name of NEW Registered Agent and/or NEW Registered (	Office address:	5: <b>43</b>
	1317 Edgewater Dr		
	NEW Registered Office Address:		<del></del>
		<del>-</del>	<del></del>
	Orlando , FL_	32804	
Signat  Nerel  Nerel	imited liability company is not organized under the lawing or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cless of organization or the operating agreement of the liability are of a member or anticological and agreement of the appointment as registered agent and agreement of all statutes relative to the proper and complete points of all statutes relative to the proper and complete projections of my position as registered agent as provided by reflect a change in the registered office address, I he had no provided this change.	he registered pility compan the limited li imited liabilit	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.  John Williams  Printed or typed name of signee
<i>سي</i> Signatur	e of Registered Agent		