

L20000357927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

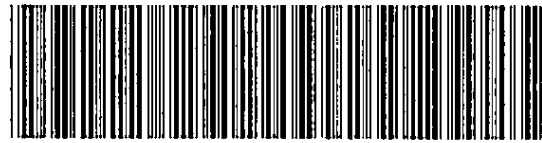
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

CMR Digital Solutions LLC

SUBJECT: _____
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard Chesler

Name of Person

CMR Digital Solutions LLC

Firm/Company

1000 Brickell Plaza Unit 2405

Address

Miami FL 33131

City/State and Zip Code

markchesler1@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard Chesler 973 524-1235

Name of Person at () _____
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 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.

CMR Digital Solutions LLC

1. Name of the limited liability company: CMR Digital Solutions LLC
2. (a) Principal office address of limited liability company: CMR Digital Solutions LLC
(Note: **MUST BE STREET ADDRESS**)
1000 Brickell Plaza Unit 2405
Miami FL 33131
11/12/2020
- (b) Mailing address of limited liability company: CMR Digital Solutions LLC
(Note: **MAY BE POST OFFICE BOX**)
1000 Brickell Plaza Unit 2405
Miami FL 33131
L20000357927
3. Date of filing/registration in Florida 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
NORTHWEST REGISTERED AGENT LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

7901 4TH ST N STE 300

ST. PETERSBURG 33702
FL

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Richard Chesler

NEW Registered Office Address:

1000 Brickell Plaza Unit 2405

Miami 33131
FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Richard Chesler

Signature of a member or authorized representative of a member

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

FILED
2021 AUG 29 AM 9:36
SECRETARY OF STATE
TALLAHASSEE, FL 32314