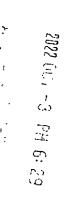
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations									
SIESTA LLC SUBJECT:									
Name of Limited Liability Company									
Dear Sir or Madam:									
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.								
Please return all correspondence concerning th	is matter to the following:								
John Taddeo									
Name of Person									
Firm/Company	_ 								
24 SE 20th Street									
Address									
Fort Lauderdale, Florida 33316									
City/State and Zip Code									
john.taddeo@ptd.law									
E-mail address: (to be used for future and	nual report notification)								
For further information concerning this matter,	please call:								
John Taddeo	954 800-6480 at ()								
Name of Person	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.

۱.	Na	ame of the limited liability company: SIESTA LLC						
2.	(a)			(b)				
	•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	. ,	Mailing address of (Note: MAY B	f limited liabi	lity c	ompany:
		1300 STIRLING ROAD 9A		1300 STIR	LING ROAD 9	A		
		DANIA BEACH, FL 33004	DANIA BEACH, FL 33004				-	
		11/17/2020		1.20000364524				
3.		Date of filing/registration in Florida	4.		Document nu	mber		
5.	(a)							
	(,	Registered Agent and Registered Office shown on the records of t	he Flor	da Dept. of Stat	e:			
		Registered Office Address (MUST BE FLORIDA STREET A	IDDRE	<u></u>		:	<u>.</u>	≥
		1300 STIRLING ROAD 9A				,	· ·	2022 OCT
		DANIA BEACH	33004	,	_)C;; -
					-	, !		ယ
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_ ,	-	 -	TD Est
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				<u>:</u>		6: 2
		John Taddeo						
	NEW Registered Office Address:			· <u> </u>	_			
		24 SE 20th Street						
			-					
		Fort Lauderdale FL	33316		_			
chage wathe	ange ent v es/we arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabre 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 of a	registe bility of f the li imited	ered office and company, it is mitted liability com	d the business is hereby confir y company or a pany. Trough Printed or typed	office of the med that the as otherwise AMBK name of sign-	e reg e cha e pro	distered ange(s) wided in
pre the to	ovisi v obl merc	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my fosition as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	e to a perfori for in ereby	ct in this cape nance of my o Chapter 605 confirm that i	ucity. I jurther duties, and I ar , F.S. Or, if th the limited liab	agree to confamiliar vis documents documents of the companies of the compa	omplyith is the investment of	y with the and accept being filed as been
Sig	gnatui	re of Registered Agent						