## 

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Carriel I annualisation to Filip Officer								
Special Instructions to Filing Officer:								





12/21/28--01014--018 \*+/5.00



## **COVER LETTER**

	Registration Section Division of Corporations		
SUBJEC	CT: Mango Nix Wesley Name of	Chapel of Limited Lia	bility Company
Dear Sir	or Madam:		
The encl	osed Registered Agent/Registered Office	Change and fe	ee(s) are submitted for filing.
Please re	eturn all correspondence concerning this n	natter to the fo	llowing:
_Ju	Name of Person	H.Z	_
	Firm/Company	<u> </u>	
123	Bramfiel Dr. Address		:
Rive	r Wiew, FL 33579.  City/State and Zip Code		_
<u>S</u>	chastianrodriquez 4: mail address: (to be used for future annual	2 Ogma	all. com
For furth	er information concerning this matter, ple	ease call:	
_Ju	Name of Jerson	at (_ <u>B</u> 13	) <u>735-4747</u> Area Code & Daytime Telephone Number
I I	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
1	Enclosed is a check for the following an	10 <b>unt</b> :	
(	\$25 Filing Fee	<b>\$55</b>	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: Mango Mix	wes	lea C	hapel			
	26244 Wesley Chapel Blun			Branfiel	ld DV	-	
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (0)		lailing address	of limited lia	ability comp	
	Unit 26244		2: veru	Rev , F	335	79	
	Lutz , Fl , 33559	_					
	11   19   2020		L2	000036	66712		
3.	Date of filing/registration in Florida	4.	1	Document nu	ımber		
5. (a)	ZenBusiness inc						
, ,	Registered Agent and Registered Office shown on the records of th	e Florida I	Dept. of State:				
	336 E. Collège Ave.						
	Registered Office Address (MUST BE FLORIDA STREET AL	<u>DDRESS)</u>				20	
	Suite 301		·		:	2023 DEC	
	Tullahassee , FL	3230	1		•	EC 21	پ د
(h)	Juan S Rodriguez.						
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:					F1110: 37	
	12736 Branfield					37	
	NEW Registered Office Address:						
	D	225	<b>3</b> 0				
	<u>KIVERVIEW</u> , FL	222	79.				
change agent v was/w	imited liability company is not organized under the laws to or changes are made, the Florida street address of the re- 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 li	egistered oility con the limit	l office and npany, it is led liability ability comp	the business hereby confi company or pany.	s office of irmed that as otherw	the regist the chang ise provid	ered ge(s) ded in
			JU	Printed or type	140cl	112065	· 
-	ture of a member of authorized representative of a member			• • • • • • • • • • • • • • • • • • • •		- •	
provisi the obj to mer	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete poligations of my position as registered agent as provided ely reflect a change in the registered office address. I he din writing of this change	e to act to erformar for in Ch reby con	n this capac ice of my di iapter 605, ifirm that th	city. I furthe uties, and I a F.S. Or, if t he limited lia	er agree to im familia his docum bility com	compty v r with and ent is bei pany has	viin ine d accept ng filed been
Signatu	are of Registered Agent						