Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

Addount Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500 Fax Number : (702)900-2290

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: documents@incorp.com

LLC REGISTERED AGENT CHANGE ADDONOVAN LLC

C. BRUMBLEY OCT 19 2022

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COVER LETTER

TO: Registration Section Division of Corporations Addonovan 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: Courtney Wehrman Name of Person InCorp Services, Inc. 3773 Howard Hughes Pkwy. - Suite 500S Address as Vegas, NV 89169-6014 City/State and Zip Code documents@incorp.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Courtney Wehrman for InCorp Services, Inc. at 800-246-2677

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:

S25 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.

I. Na	me of the limited liability company: Addono	van LLC		
2. (a)	1321 Apopka Airport Rd, Unit 108	(b) 1321 Apopka Airport Rd, Unit 108		
i _. a.;	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Apopka, FL 32712	Apopka,	FL 32712	
	08/31/2020	L200	00388674	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	DONOVAN, LUSIA K		and the same of th	
(/	Registered Agent and Registered Office shown on the records of		310:	
	1321 Apopka Airport Rd, U	nit 108		
	Registered Office Address MUST BE FLORIDA STREET		<i>γ</i> : Ν :	
			- 1000 TAC	
	Apopka ,F	32712	FIL 2022 OCT 18 SEGRE PARY TALLAHAS	
			HAR	
(b)	InCorp Services, Inc.		(0.00	
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	- SEE ST	
	17000 C7th Court North		D 2:3	
	17888 67th Court North		<u> </u>	
	NEW Registered Office Address:			
	Loxahatchee, F	33470	_	
the cha agent v	imited liability company is not organized under the lange or changes are made, the Florida street address evill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the	if the registered of it is the little of the limited liabil	t is hereby confirmed that the change(s) lity company or as otherwise provided in	
PHi	sake V-	Lusia Do		
	ture of a member or authorized representative of a member		Printed or typed name of signee	
provisi the obl to men	by accept the appointment as registered agent and as fons of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of this change.	e performance of m ed fôr in Chaptèr 6 Thereby confirm tho	05, F.S. Or, if this document is being filed at the limited liability company has been	
<u>C:</u>	Isabel Burgos on bei	nait of inCorp Se	ervices, inc.	
ວາຍູກລານ	nt of Registered Agent		TY 221.4	