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(R	equestor's Name)					
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SECRETARY OF STATE

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## COVER LETTER

TO: Registration Section Division of Corporations	
,	
SUBJECT: FFC Fineblanking & Forming Consulting	ng, LLC
Name	e of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Rick Garner	
Name of Person	· <del></del>
FFC Fineblanking & Forming Consulting, LLC	
Firm/Company	
35 Cambridge Trace	
Address	
Ormond Beach, Florida 32174	
City/State and Zip Code	
rickg924@gmail.com	
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this matter,	please call:
Rick Garner	at ( 513 ) 313-0657
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following	amount:
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

## 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:FFC Fineblanking	& Forming C	onsulting,	LLC			
2. (a)	35 Cambridge Trace						
≟. (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)					
	Ormond Beach, Florida 32174		rmond Be	ach, Florida 32	174		
	02/28/2020	<b>L2</b> 0	00038997	73			
3.	Date of filing/registration in Florida	4.	••	Document nur	mber		
5. (a)	inc Authority RA						
5. (a)	Registered Agent and Registered Office shown on the records of t	he Florida De	pt. of State				
	Inc Authority, LLC 1450 Vassar Street Reno, Nevada 8						
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)					
	390 North Orange Ave., STE 2300				S	20	<b>1</b>
	Orlando , FL	32801			TALL TALL	2024 DEC	- <u></u> ,
G-X	Registered Agents Inc				OKETARY OF ALLAHASSEE	C -3	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				75 OF <b>PX</b>	ITI	
	7901 4th St N			1 3: 50 E. FL			
	NEW Registered Office Address:				म	œ	
	STE 300	. <u>-</u>					
	St. Petersburg	33702					
the ch agent was/w the art	limited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ature of a member or authorized representative of a member	the register ability compost the limite	red office pany, it is d liability pility com	e and the busing thereby confiner they company or	ess office rmed that as otherw	of the ch	registered ange(s)
provis the ob to met ngtifie	why accept the appointment as registered agent and agressions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I writing of this change.	performand d for in Cha hereby conf	this cape we of my e ipter 605 irm that i	acity. I furthe duties, and I a , F.S. Or, if th the limited ha	r agree to m familia his docum bility com	comp or with ent is opany f	ly with the and accep heing fileo as been
	David Roberts - Assistant Sure of Registered Agent	ecretary					

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00