## L21000002491

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195									
REFERENCE : 412079 7392006									
AUTHORIZATION :									
COST LIMIT : \$725.00									
ORDER DATE : January 25, 2023									
ORDER TIME : 9:38 AM									
ORDER NO. : 412079-005									
CUSTOMER NO: 7392006									
CHANGE OF AGENT									
COST LIMIT : STATE DECEMBER  COST LIMIT : STATE DECEMBER  ORDER DATE : January 25, 2023  ORDER TIME : 9:38 AM  ORDER NO. : 412079-005  CUSTOMER NO: 7392006  CHANGE OF AGENT  NAME: FIVE STONES VENTURES, LLC  PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:  CERTIFIED COPY  XX PLAIN STAMPED COPY									
Mais. Tava Stories Varionas, ale									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CONTACT PERSON: Eyliena Baker EXT#									

EXAMINER:

## **COVER LETTER**

TO:

Registration Section

**Division of Corporations** Five Stones Ventures, 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: Kathy Obbie Name of Person FSI Group, LLC Firm/Company 7875 Montgomery Road, Suite 42 Address Cincinnati, OH 45236 City/State and Zip Code kobbie@fsig.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kathy Obbie 362-3260 Name of Person Area Code & Daytime Telephone Number **Mailing Address:** Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 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 INHS18 (2/14)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOILIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compar. submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

1. N	lame of the limited liability company:	Ventures,	LLC	;						
2. (a)			(h)							
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del></del>	(b)					•		
	3700 S Ocean Blvd, Unit 1606		3700 S Ocean Blvd, Unit 1606						_	
	Highland Beach, FL 33487		-	Highlar	nd Beach, FL	ach, FL 33487				
	12/28/2020		L2	210000	002491					
3.	Date of filing/registration in Florida	4.	_		Documen	t numbe				
5. (a)	Steven Stein									
J. (u)	Registered Agent and Registered Office shown on the records	s of the Florid	da De	pt. of S	tate:					
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRES	:S)	<del></del> -						
	1201 Hays Street		<u>1</u>					<i>~</i> 3		
	Tallahassee	FL_32301						.023 J	7	
(b)							••	JA1 20		
	Enter name of NEW Registered Agent and/or NEW Register	red Office ad	ldre					أميث		
	Corporation Service Company							<u></u>	7	
	NEW Registered Office Address:		_		<del></del>		., 17	ဒ္ဓ		
	1201 Hays Street									
	Tallahassee	FL 32301	_		_					
agent wi was/wef the artic	mited liability company is not organized under the lor changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited eauthorized by an affirmative vote of the members less of organization or the operating agreement of the	aws of the ne registere liability con	mpa ited iabil	nce ar ny, it i liabilit ity cor	is h <mark>ereb</mark> y cor	ess office	e of the i	register	ed	
	re of a member or authorized representative of a member			_	Printed or typ	oed name	of signee			
I hereby provision the oblig to merely notified i	c, accept the appointment as registered agent and agens of all statutes relative to the proper and complete ations of my position as registered agent as provide verified a change in the registered office address, I in writing of this change.	gree to act i e performa ed for in Ci herehy coi	in th nce hapi nfiri	is cap of my der 605 n that			_	ply wit h and a s being has be	h the sccept filed en	
Signature	of Registered Agent									