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2023 MAR -6 AM 10: 06 SECRETARY OF STATE ALLAHASSEE, FLOOR

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Anapana LLC	Same of Limited Liability Company				
•	dame of Finned Financy 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:				
Matthew Hoskins					
Name of Person					
Anapana LLC					
Firm/Company					
500 14					
500 Maple Avenue					
Address					
New Martinsville, WV 26155					
City/State and Zip Cod	e				
matthosks@gmail.com					
E-mail address: (to be used for future a	annual report notification)				
For further information concerning this mat	ter, please call:				
Matthew Hoskins	at (757) 563-3441				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
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

1.	Na	me of the limited liability company:	Anapana L	LC 			
2.	(a)	Anapana LLC		(b	Anapana LL	C	
(()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		7901 4th St. N STE 13172	1717 <u> </u>			N STE 13172	
		St. Petersburg, FL 33702		_ _	St. Petersburg	sburg, FL 33702	
		12/23/2020		L21000		3657	
3.		Date of filing/registration in	Horida	4	Docu	iment number	
5.	(a)	HOSKINS, MATTHEW B					
	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State					
		10901 BRIGHTON BAY BI	_VD NE				
		Registered Office Address (MUST BE FLORIDA STREET A			<u>}</u>		
		APT. 7301					
		ST PETERSBURG	, FL	33716		2023 SEF TALI	
((b)	Registered Agents Inc				E1 2023 MAR - SECRETA FALL AHA	
	()	Enter name of NEW Registered Agent and/or NEW Registered Office address			dress	ASSEELF	
		7901 4th St N				AM 10: 06	
		NEW Registered Office Address				€ 6	
		STE 300	····			·	
		St. Petersburg	FL	3370	2		

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Matthew Hoskins

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

David Roberts - Assistant Secreta

Signature of Registered Agent