## L21000008463

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PICK-UP	MAIT	MAIL	
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## **COVER LETTER**

TO:	Registration Section
	Division of Corporations

PPG POLITICAL CONSULTING, LLC SUBJECT:						
	d 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	Please return all correspondence concerning this matter to the following:					
Page P. Gritte						
· · · · · · · · · · · · · · · · · · ·	<del></del>					
Name of Person						
PPG POLITICAL CONSULTING, LLC						
Firm/Company						
3625 W Santiago Street	203					
Address						
Tampa, FL 33629	209 JUN 12					
	<del></del>					
City/State and Zip Code	ý.					
page@ppgconsult.com	्र कें					
E-mail address: (to be used for future annual report no						
For further information concerning this matter, please call:						
Page P Gritte 813	389 - 9574					
Name of Person	Area Code & Daytime Telephone Number					
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, 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:						
□ \$25 Filing Fee	\$55 Filing Fee & Certified Copy					
INHS18 (2/14)						



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## 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.

Na	ame of the limited liability company: PPG POLITICAL (	CONSULTING, LLC		
(a)	3625 W Santiago Street	3625 W Santiago Street		
, ,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability c (Note: MAY BE POST OFFICE		
	Tampa, FL 33629	Tampa, FL 33629		
	01/01/2021	L21000008463		
	Date of filing/registration in Florida	4. Document number	<del>-</del>	
(a)	Page P Gritte			
(4)	Registered Agent and Registered Office shown on the records of the	he Florida Dept. of State:	V.190	
	Page P Gritte	DDRESS)	$\mathcal{L}_{\mathcal{L}}}}}}}}}}$	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	フ <sup>い</sup> 、0.19	
	3625 W Santiago Street	An Iron B	× 1.	
	Tampa EL 3	33629	<i>L</i> ; ,	
(b)	Pose P Gritle	- Shorn You	; ;	
	Enter name of NEW Registered Agent and/or NEW Registered (	Office address: \\ \\ \(\ell(\ell')'\)	-, ·	
	3625 W Santiago St		9 स	
	NEW Registered Office Address:			
	3			
	Tampa .FL	33629		
ige it w /wei	mited liability company is not organized under the laws or changes are made, the Florida street address of the result be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of eles of organization or the operating agreement of the li	registered office and the business office of the regoility company, it is hereby confirmed that the chartened liability company or as otherwise profile.	gistered ange(s)	
gnatu	of a member or authorized representative of a member	Printed or typed name of signee		
visio oblig ierel	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	e to act in this capacity. I further agree to comp erformance of my duties, and I am familiar with for in Chapter 605, F.S. Or, if this document is a creby confirm that the limited liability company k	ly with th and acce being file has been	