L21000015491

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(Address)
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(City/State/Zip/Phone #)
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Franklin Karibjanian & Law

A Professional Limited Liability Company Washington ~ Boca Raton ~ Naples www.fkl-law.com

> EMILY K. CHRISTIAN echristian@fkl-law com Direct: (202) 869-3608

March 5, 2021

SENT BY CERTIFIED MAIL

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: <u>Heather Lane LLC – L21000015491</u>

Dear Sir or Madam:

Enclosed is a Statement of Change of Registered Agent for the above-referenced LLC, as well as a check in the amount of \$25 for payment of the filing fee.

* * * * *

If you have any questions or concerns, please let us know.

Sincerely,

Emily K. Christian Paralegal

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Enclosures (as enumerated)

COVER LETTER

TO: Registration Section Division of Corporations	
Heather Lane LLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Arnold Levinson	
Name of Person	
Firm/Company	
9162 Benedetta Place	
Address	
Boca Raton, FL 33496	
City/State and Zip Code	
all220@yahoo.com	
E-mail address: (to be used for future annual r	eport notification)
For further information concerning this matter, plea	se call:
Arnold Levinson at	847 308-2436
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 amo	ount:
■ \$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.

Nar	me of the limited liability company:	J.C			
	e/o Arnold Levinson	(b)	c/o Amold Levi	inson	
(4) _	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailin		nited liability company: OST OFFICE BOX)
	9162 Benedetta Płace		9162 Benedetta	Place	
	Boca Raton, FL 33496		Boca Raton, FL	33496	
	January 20, 2021	I.	21000015491		
	Date of filing/registration in Florida	4.	Doc	ument numb	cr
4.3	Corporation Service Company				
(a)	Registered Agent and Registered Office shown on the records	of the Florida l	Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)	<u> </u>		
	1201 Hays Street				
	Tallahassee	FL_32301			
(le)	Arnold Levinson				
(b)	Finter name of NEW Registered Agent and/or NEW Registe	red Office add	ress:		
					:
	NEW Registered Office Address:				
	9162 Benedetta Płace				·.
					<u>.</u>
	Boca Raton	FL 33496			
iange gent v as/we		the registered I liability cor rs of the limi	npany, it is her ted liability co	eby confirmation of the co	ed that the chan
e urti	cites (1 or British 11)		ld Levinson	•	
e arti	~	Zino			
	ture of a member or authorized representative of a member			ited or typed na	me of signee
Signa herei ovisi e ohl mere	ture of a member or authorized representative of a member by accept the appointment as registered agent and completions of all stanites relative to the proper and completigations of my position as registered agent as provely reflect a change in the registered office address, if in writing of this change.		Prir	I further a	orga to comply with th