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	To:	Division of Corporations Fax Number : (850)617-6383	3 14. 1033 14.	2022 D	•		
9: EC	From:	Account Name : REGISTERED AGENTS INC. Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (855)330-1010	77. -4 .	2022 DEC 3 PM 2:			
** **	*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**						
2072 OE C	L ING	TEC Additess.					

LLC REGISTERED AGENT CHANGE NEXT STEP, COLLEGE FRESHMAN LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

C. BRUMBLE

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. Na	ame of the limited liability company: Next S	Step, Co	llege	Freshman LLC		
2. (a)		Or				
	Principal office address of limited liability compan (Nate: MUST BE STREET ADDRESS)	y		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)		
	01/05/21		L2100	00016721		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	Legal Zoom					
	Registered Agent and Registered Office shown on the record	rds of the Florida	Dept. of Stat	te		
	5575 S. SEMORAN BLVD. SUITE	36				
	Registered Office Address (MUST BE FLORIDA STR	EET ADDRESS	<u> </u>			
				FIL 2022 DEC 13 SEGNETARY TALLAHAS		
	ORLANDO	c: 32822)			
		_, []				
(b)	Registered Agents Inc			ED PHI2: 06 OF STATE SEE, FL		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>	stered Office add	iress:			
	7901 4th St N	06 06				
	NEW Registered Office Address:			_		
	STE 300			_		
	St. Petersburg	. FL 33702	I.			
he cha	mited liability company is not organized under the	iss of the regis	tered offic	e and the business office of the registered		
vas/we	cill be identical. Or, in the case of a Florida limit are authorized by an affirmative vote of the memb cles of organization or the operating agreement o	ers of the lim	ited liabilit	ty company or as otherwise provided in		
	Ribery Park	Rile	ey Park			
-	ure of a member or authorized representative of a member			Printed or typed name of signee		
ne obu o mere wtifieg	oy accept the appointment as registered agent and ons of all statutes relative to the proper and competencies of my position as registered agent as problem reflect a change in the registered office address in writing of this change.	d agree to act plete performe wided for in C ss, I hereby co	in this cap ince of my hapter 60; infirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been		
u K.	Bill Havre - Assistered Agent	stant Secrei -	tary			