## h21000020417

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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APR 1 9 2021

S. YOUNG

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Faithway Powder Co Name of Limited Lie	ability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and f	ee(s) are submitted for filing.
Please return all correspondence concerning this matter to the fo	ollowing:
Mary With Name of Person  Fathway Pauder Coating LC Firm/Company  1129 SE Ormond With Rd Address	
City/State and Zip Code	_
Amwitt 97 a yahoo. Com E-mail address: (to be used for future annual report notific	ation)
For further information concerning this matter, please call:	
Mary With at (386)	
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

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:

## 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. Name of the limited liability company: Fathuru Pourder Couling U	
2. (a) 4588 W SR238 Lake Butterft 3204 (b) 1129SE Orman With	Rd Catoryet
Principal office address of limited liability company: Mailing address of limited lia  (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST O	
4588 W SR238 1/29 St. Wina	d WPHRA
Lake Butla F132054 lake Met F 3	2025 2025
To the contract of	<del>~~~</del>
January 1,2021 L2/000204/7	<del>-</del>
3. Date of filing/registration in Florida 4. Document number	
5. (a) HOUNTH Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
<b>O</b>	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	3
4088 W ORDOS	
Lake Dutler FI 22004	) 0
(b) Mary Wall	P ().
Enter name of NEW Registered Agent and/or NEW Registered Office address:	ა. გ
NEW Registered Office Address:	
FL.	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirm change or changes are made, the Florida street address of the registered office and the business office of the agent will be identical. Or in the case of a Florida Verice d. I.	
was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise	l 1. / \
the articles of organization or the operating agreement of the limited hability company	,
Signature of a member or authorized representative of a member Printed or typed name of sign	ner
y the transfer of sign	
Thereby accept the appointment as registered areast and appear to a first to the	
y the transfer of sign	