1/11/24, 1:19 PM

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000016153 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC

Account Number: I20220000070

: (888)462-3453

Fax Number

: (877)919-2613

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

EFILE1234@INCFILE.COM Email Address:__

LLC REGISTERED AGENT CHANGE CNIT TECHNOLOGY LLC



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K. SALY IAN 1 2 2024

COVER LETTER

(((H24000016153 3)))

TO:	Registration Section Division of Corporations	(((H24000016153				
SUBJ	CNIT TECHNOLOGY LLC					
Name of Limited Liability Company						
Dear S	Sir or Madain:					
The er	iclosed Registered Agent/Registered Office Change	and fee(s) are submitted for filling.				
Please	return all correspondence concerning this matter to	the following:				
LOVE	TTE DOBSON					
	Name of Person					
	Firm/Company					
17350	STATE HWY 249 STE 220					
	Address					
HOUS	TON, TX 77064					
	City/State and Zip Code					
EFILE	1234@INCFILE.COM					
F	-mail address: (to be used for future annual report r	otification)				
For fu	ther information concerning this matter, please call	:				
LOVE	TTE DOBSON at [at [888-462-3453				
	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				
	ranunaboo, i L 52517	Tallahassee, FL 32303				

Enclosed is a check for the following amount:

■ \$25 Filing Fee

\$55 Filing Fee & Certified Copy

Signature of Registered Agent

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY (((H24000016153 3)))

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.

2. (a)	2801 RIVERSIDE DR APT 1068		(b) 2801 RIV	TERSIDIE DR APT 1068
,	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)		,	Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)
	CORAL SPRINGS, FL 33065		CORALS	SPRINGS, FL 33065
	01/11/2021		1.21000026	0062
ã.	Date of filing/registration in Florida	-1.		Document number
5. (a)	REPUBLIC REGISTERED AGENT LLC			
(a)	Registered Agent and Registered Office shown on the record	s of the Flor	ida Dept, of Sta	<u> </u>
	1150 Nw 72nd Ave Tower I Ste 455			
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRE	<u>S.S)</u>	THE FILE ONLY
	Miami	, FL_33126	•	THE THE
(b)	Gemima Cruz			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ered Office	address:	Tel gallo
	2801 Riverside Dr Unit 106s			
	NEW Registered Office Address:			_
	Coral Spring	FL 33065		
change agent v was/we the arti	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited at authorized by an affirmative vote of the member cles of organization or the operating agreement of the member of the organization or the operating agreement of the operating agreement	the registed liability of the limited the limited	ered office an company, it i mited liabilis	nd the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in
	ture of a member or authorized representative of a member	_		Printed or typed name of signee
provisi the obl to merc	by accept the appointment as registered agent and ons of all statutes relative to the proper and completed on the proper and completed on the position as registered agent as proved reflect a change in the registered office address. I'm writing of this change.	agree to a eie perfori ided for in . I hereby	et in this cap nance of my Chapter 602 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accep 5. F.S. Or, if this document is being filed the limited liability company has been