## KZ1 CCCC 6451C

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Business Entity Name)		
(Document Number)		
,		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
J. HORNE		
FEB - 8 2022		
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Office Use Only



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SECRETARY OF SIGNIFICALL ARASSEE, FILES

## **COVER LETTER**

TO: Registration Section Division of Corporations			
2			
SUBJECT: C & C Entertainment and I	More, LLC		
Na	une of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
Darnice Cloudy			
Name of Person			
C & C Entertainment & More LLC			
Firm/Company			
2526 W Union St			
Address			
Tampa Florida 33607			
City/State and Zip Code			
darnicecloudy@gmail.com			
E-mail address: (to be used for future ar	inual report notification)		
For further information concerning this matter	er, please call:		
Darnice Cloudy	at (812 ) 9879739		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the followin	ng amount:		
<b>≥</b> \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

## 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: C&C Ente	ertainment & More	LLC
2. (a) 2526 W Union St Tampa, Fl. 33607  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b) 2000 E	12th Ave Unit 75202 Tampa, Fl.33 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
2526 W Union St	2000 E	ast 12th Ave Unit 75202
Tampa, Fl. 33607	Tampa	FI. 33605
2/5/2021	L210000	
3. Date of filing/registration in Florida	4.	Document number
5. (a) Registered Agents INC		_
Registered Agent and Registered Office shown on the records	s of the Florida Dept. of Sta	te:
Bill Havre Registered Agents INC		
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		<b>202</b> 2
7901 4th St N STE 300		- CRE JA T
St. Petersburg	FL 33702	FIL. 2022 JAN 20 SECRETARY ALLAHASSE
(b) Darnice Cloudy		
Enter name of NEW Registered Agent and/or NEW Register	ered Office address:	
Darnice Cloudy		∞
NEW Registered Office Address:		_
2526 W Union St		<b></b>
Tampa	<sub>FL</sub> 33607	_
If the limited liability company is not organized under the the change or changes are made, the Florida street address agent will be identical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of the member the articles of organization or the operating agreement of the property Cloudy.	s of the registered offic d liability company, it rs of the limited liabili the limited liability co	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
Darnice Cloudy Signature of a member or authorized representative of a member	Darnice Clou	Printed of typed name of signed
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and complethe obligations of my position as registered agent as provito merely reflect a change in the registered office address notified in writing of this change.	agree to act in this cap ete performance of my ided for in Chapter 60. . I hereby confirm that	
Darnice Cloudy		
Signature of Registered Agent		