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(F	Requestor's Name)	
	Address)	
	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(T	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corporations	
Notification of New Registered Agent SUBJECT:	
	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Pablo G Auffant Matos, P.E.	
Name of Person	······································
Auffant and Partners, LLC	
Firm/Company	
1251 Snug Harbor Drive	
Address	ECK LAHASS TALLAHASS
Casselberry / Florida / 32707	5 S
City/State and Zip Code	
AuffantAndPartners@yahoo.com	
E-mail address: (to be used for future annual re-	port notification)
For further information concerning this matter, please	e call:
Pablo G Auffant Matos, P.E.	321 277-0704
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 amou	nt:
☐ \$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.

) _			(b)_					
, -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	` , , -		Mailing address (Note: MAY	of limited lial BE POST OF	-	
	1251 Snug Harbor Drive		i	1251 Snu _l	g Harbor Drive			
	Casselberry / Florida / 32707		Casselberry / Florida / 32707					
	February 14, 2021		L2	21000076	5742			
-	Date of filing/registration in Florida	_ 4.			Document n	umber		
ı) .	Registered Agent and Registered Office shown on the records of	the Flor	ida D	ept. of Sta	 itc:			
	Pablo G Auffant Matos, P.E.							
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRE	ESS)	<u>-</u>				
	1251 Snug Harbor Drive							
					_			
	Casselberry , FI	32707						
						:!'r	202	
) _	Enter name of NEW Registered Agent and/or NEW Registered					A.	2021 HAR3	* Ç=
	Enter name of NEW Registered Agent and/or NEW Registered	Office	nddr	<u>ess</u> ;]> ;"	Ž	
	Gabriel G. Auffant, AIA					AHASS T	$\frac{3}{2}$	
					_	ى ئار	<u> </u>	
	NEW Registered Office Address:					(1),	AH 9:	
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		P:	ablo (U Auftan	t Matos, P.E.	.d		
	are of a member or authorized representative of a member				Printed or typ			
011	y accept the appointment as registered agent and agons of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this shange	nertor	771/777	ce of mv	dulies and L	am tamilia	· with a	าทส สด