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Certified Copies	Certificates	of Status		
Special Instructions to	Filing Officer:			
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FILED
SECRETARY OF STATE
OF CORPORATIONS
SECRETARY OF CORPORATIONS

J DENNIS

OCT 12 2022

## **COVER LETTER**

	Registration Section Division of Corporations				
SUBJE	CT: 1100 GULF SHORE LLC				
Name of Limited Liability Company					
Dear Si	ror Madam:				
The enc	losed Registered Agent/Registered O	ffice Change and fe	e(s) are submitted for filing.		
Please r	eturn all correspondence concerning (	this matter to the fol	llowing:		
Melissa	a Jones				
<del></del>	Name of Person		-		
ZenBusi	ness Inc.				
	Firm/Company		-		
336 E. C	College Ave. Suite 301				
	Address	,	-		
Tallahas	see, FL 32301				
	City/State and Zip Code		-		
ra@zent	business com				
E-	mail address: (to be used for future a	nual report notifica	ition)		
For furt	her information concerning this matte	er, please call:			
Melis	sa Jones	844 at (	493-6249		
	Name of Person		Area Code & Daytime Telephone Number		
	Mailing Address:		Street Address:		
	Registration Section		Registration Section		
	Division of Corporations		Division of Corporations		
	P.O. Box 6327		The Centre of Tallahassee		
	Tallahassee, FL 32314		2415 N. Monroe Street. Suite 810		
			Tallahassee. FL 32303		
Enclosed is a check for the following amount:					
	□ \$25 Filing Fee	<b>□ \$</b> 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.

1.	Na	une of the limited liability company: 1100 Gl	JLF	SH	ORE LLC	
2.		1100 GULF SHORE BOULEVARD NOR	TH	<b>(</b> b)	1100 GULF SHORE BOULEVARD NORTH	
۷.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0,	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
		#209			#209	
		NAPLES, FL 34102			NAPLES, FL 34102	
		02/18/2021		_	L21000082791	
3.		Date of filing/registration in Florida	4		Document number	
5.	(a)	Registered Agents Inc.				
		Registered Agent and Registered Office shown on the records	of the F	lorida	Dept. of State:	
		7901 4th St N				
		Registered Office Address (MUST BE FLORIDA STREE	T.ADDI	RESS.		
		STE 300				
		St. Petersburg	FL 337	02		
	(b)	ZenBusiness Inc  Enter name of NEW Registered Agent and/or NEW Registered Office address:				
		336 E. College Ave.				
		NEW Registered Office Address:				
		Suite 301				
		Tallahassee	FL	01	<u>.                                    </u>	
cha age wa	inge ent v s/we	imited liability company is not organized under the or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of t	he regi liabilit s of the	stere y con lim	npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in	
		Ælizabeth Floyd		Eliz	abeth Floyd	
	•	ture of a member or authorized representative of a member			Printed or typed name of signee	
pro the	ovisi obl merc	by accept the appointment as registered agent and a constant of all statutes relative to the proper and completing at the proper and completing at the proper and completing at the proper and completing according to the property of the constant of the property of the pro	gree to te perf ded for I herei	orma in C by co	in this capacity. I further agree to comply with the nce of my duties, and I am Jamiliar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been	
Sig	L/L gnatu	re of Registered Agelii				