

k21000093614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

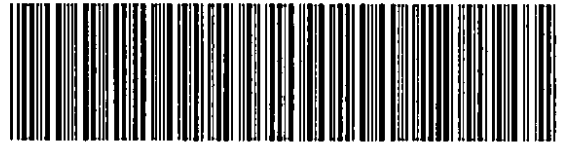
(Business Entity Name)

(Document Number)

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2022 JUL 22 PM 11:29

RA Change

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PAFUNDINGLIAISON INC.

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pamela A. Martinez

\_\_\_\_\_  
Name of Person

PAFUNDINGLIAISON INC.

\_\_\_\_\_  
Firm/Company

1516 Hunters Mill Place

\_\_\_\_\_  
Address

Oviedo, FL 32765

\_\_\_\_\_  
City/State and Zip Code

pamela1516.pm@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pamela Martinez

407

592-1777

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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 amount:**

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

2022 OCT 22 PM 1:29

**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: PAFUNDINGLIAISON INC.
2. (a) 1516 Hunters Mill Place  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
Oviedo, FL 32765
- (b) 115 Orense Way  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
Oviedo, FL 32765
3. February 25th, 2021  
Date of filing/registration in Florida
4. 1.21000093614  
Document number
5. (a) Cheyenne Moseley  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
US CORP. AGENTS  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
5575 S. Semoran Blvd. Suite 36  
Orlando, FL 32822
- (b) Pamela A. Martinez  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
  
NEW Registered Office Address:  
115 Orense Way  
Oviedo, FL 32765

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Pamela A. Martinez  
Signature of a member or authorized representative of a member

Pamela A. Martinez  
Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Pamela A. Martinez  
Signature of Registered Agent