

221 000 111 016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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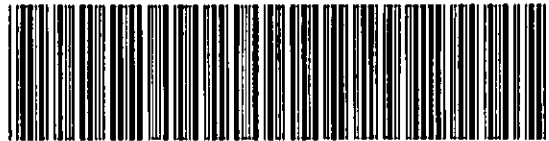
(Business Entity Name)

(Document Number)

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TO: Registration Section
Division of Corporations

SUBJECT: Nummus Exchange Holdings, LLC
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:

Mark Huebner
Name of Person

Nummus Exchange Holdings, LLC
Firm/Company

14101 Panama City Beach Pkwy, Ste. 160
Address

Panama City Beach, FL 32413
City/State and Zip Code

colleen@perent.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Colleen Huebner at (607) 772-2408
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 14, 2022

MARK HUEBNER
14101 PANAMA CITY BEACH PARKWAY
SUITE 160
PANAMA CITY BEACH, FL 32413

SUBJECT: NUMMUS EXCHANGE HOLDINGS, LLC
Ref. Number: L21000111016

We have received your document for NUMMUS EXCHANGE HOLDINGS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 122A00025344

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: Nummus Exchange Holdings, LLC

2. (a) 14101 PCB Pkwy # 160

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Panama City Beach, FL
32413

(b)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 3/17/2021

Date of filing/registration in Florida

L21000111 016

4.

Document number

5. (a) Brian D. Hess

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

9108 Front Beach Road

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Panama City Beach, FL 32407

(b) Mark Huebner

Enter name of NEW Registered Agent and/or NEW Registered Office address:

14101 Panama City Beach Pkwy

NEW Registered Office Address:

Suite 140

Panama City Beach, FL 32413

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.

Signature of a member or authorized representative of a member

Mark Huebner

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.

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

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