## 12100118526

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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJI	The Wellness Arena LLC		
		Name of Limited L	iability Company
Dear S	ir or Madam:		
The en	iclosed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.
Please	return all correspondence concerning	; this matter to the	following:
Heathe	r Arena		
	Name of Person	· · · · · · · · · · · · · · · · · · ·	····
The W	ellness Arena, LLC		
	Firm/Company		<del></del>
4145 E	Sonfire Drive		
	Address		<del></del>
Odessa	ı, FL 33556		
	City/State and Zip Cod	e	<u> </u>
thewel	lnessarenallc@gmail.com		
F	E-mail address: (to be used for future	annual report notif	ication)
For fu	rther information concerning this mat	ter, please call:	
Heathe	er Arena	973 at (	4646033
	Name of Person	4. (	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 follow	ing amount:	
	□ \$25 Filing Fee	■ \$	55 Filing Fee & Certified Copy
INHSI	8 (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.

	ne of the limited liability company:			
(a) _	Heather Arena		(b) Heather A	Arena
(-) _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	4145 Bonfire Drive		4145 Bont	fire Drive
•	Odessa, FL 33556		Odessa, F	L 33556
(	06/08/2021		L21000118	526
_	Date of filing/registration in Florida	4.		Document number
(a)	United States Corporation Agents, INC			
	Registered Agent and Registered Office shown on the records o	f the Flor	ida Dept. of Star	le:
	Registered Office Address (MUST BE FLORIDA STREET	" ADDRE	ESS)	_ 20
	5575 S. Semoran BLVD, Suite 36			2022 APR
	Orlando . F	32822 L		, <del></del>
F	Heather Arena			- 8 P
(b) <u> </u>	Enter name of NEW Registered Agent and/or NEW Registere	d Office	address:	PH 4: 37
	NEW Registered Office Address:		· · · · · · · · · · · · · · · · · · ·	_
	4145 Bonfire Drive			_
	Odessa . F	L 33556		
ange o gent wi as/wer	mited liability company is not organized under the last changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited leganthorized by an affirmative vote of the members les of organization or the operating agreement of the	e regist iability of the l e limite	ered office an company, it i imited liabilit	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
Signatu	re of a member or authorized representative of a member	_		Printed or typed name of signee
hereby ovisio e oblig	y accept the appointment as registered agent and ag ns of all statutes relative to the proper and complete gations of my position as registered agent as provid y reflect a change in the registered office address, l	ree to de perfored for it hereby	nct in this cap mance of my n Chapter 603 confirm that	acity. I further agree to comply with the duties, and I am Jamiliar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been
merei stified	in writing of this change.		-	