Florida Department of State División of Corporations Electronic Elling Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : FILE RIGHT LLC
Account Number : I20170000091
Phone : (718)878-5811
Fax Number : (718)732-4580

Fax Number : (718)732-4580

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

\ddress:		
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LLC REGISTERED AGENT CHANGE RETURNHOUSE LLC

Certificate of Status	0
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Page Count	02
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2024 JAN 31 PH 2: 15

Electronic Filing Menu

Corporate Filing Menu

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	COVER I	LETTER · .	H240000387643
TO: Registration Section Division of Corporations		,	
SUBJECT: RETURNHOUSE L	L C Name of Limited 1	iability Company	
Dear Sir or Madam:	radio of Billinea L	monthly company	
The enclosed Registered Agent/Registered	l Office Change and	foo(a) are submitted for filin	0
Please return all correspondence concerning			g.
Transcription of the police of	<u></u>		
Mark Fuchs			
Name of Person	· · · · · · · · · · · · · · · · · · ·		
File Right RA Services, LLC			
Firm/Company			
1425 37th Street, Suite 201			
Address			
Brooklyn, NY 11218			
City/State and Zip Co	nde		
agent@fileacorp.com			
E-mail address: (to be used for future	e annual report notif	ication)	
For further information concerning this m	atter, please call:		
Sara Ringei	718 at (878-5811)	
Name of Person		Area Code & Daytime Te	elephone Number
Mailing Address:		Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporation The Centre of Tallahas	
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street Tallahassee, FL 32303	t, Suite 810
Euclosed is a check for the follo	wing amount:		H24000038
■ \$25 Filing Fee INHS18 (2/14)	<u> </u>	555 Filing Fee & Certified Co	эру

H240000387643

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. 1	Vame of the limited liability company: RETURNH	OUSE L	L C
2 (a) 58! N FRANKLIN TURNPIKE	(b)	
Σ. ξα	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0/	Meiling address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	RAMSEY, NJ 07446		
3.	3/22/2021 Date of filing/registration in Florida		L21000118932 Document number
	Date of think tekizuation in Figure	۲۰.	Document manaci
5. (a) Business Filing Incorporated		_
	Registered Agent and Registered Office shown on the records of a 1200 South Pine Island Rd, Plantation, FL 33326 Registered Office Address (MUST BE FLORIDA STREET)		of State:
			2024 JAN 3
			- -
(b	File Right RA Services, LLC	005	
	Enter name of NEW Registered Agent and/or NEW Registered	Omee suaress.	
			₽
	625 E Twiggs Street, Ste. 110		
	NEW Registered Office Address:		
	Tampa, FL 33602		
chang agent was/v	limited liability company is not organized under the law se or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registered offi ability compan of the limited li	ice and the business office of the registered y, it is hereby confirmed that the change(s) iability company or as otherwise provided in
/s	/ Mark Fuchs	Mark Fuci	ns, Authorized Person
Sig	Signature of a member or authorized representative of a member		Printed or typed name of signee
provi the oi to me notifi	eby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address, I led to make fuchs	ee to act in thi performance of d for in Chapte hereby confirm	is capacity. I further agree to comply with the finy duties, and I am Jamiliar with and accept er 605. F.S. Or, if this document is being filed a that the limited liability company has been
	tyrack rucits		