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(Requestor's Name)				
(Address)				
		118		
(Address)				
(Cit	y/State/Zip/Phone	e #)		
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(Business Entity Name)				
(Document Number)				
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J DENISS OCT 12 2022

COVER LETTER

Division of Corporations		
SUBJECT: 114 S 12th St Commercial LLC		
Name of Lim	ited Liability Company	
Dear Sir or Madam		
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter t	to the following:	
Melissa Jones		
Name of Person		
ZenBusiness Inc.		
Firm/Company		
336 E. College Ave. Suite 301		
Address		
Tallahassee, FL 32301		
City/State and Zip Code		
ra@zenbusiness com		
E-mail address: (to be used for future annual report	t notification)	
For further information concerning this matter, please ca	M:	
Melissa Jones 84.	4 493-6249	
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	☐ \$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. N a	ame of the limited liability company: 114 S 12	th St	Comme	ercial LLC	
2. (a)	114 SOUTH 12TH STREET		(b) 114 SOUTH 12TH STREET		
Z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:			
	TAMPA, FL 33602		TAMP	(Note: MAY BE POST OFFICE BOX) A, FL 33602	
	TAIVII A, I L 00002		1/3/4/1	A, 1 L 33002	
	03/16/2021		L21000)124166	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Registered Agents Inc.				
J. (-,	Registered Agent and Registered Office shown on the records of	the Florid	ia Dept. of State	:	
	7901 4th St N				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>:27</u>		
	STE 300				
	St. Petersburg	33702			
	Z-Position I.e.		· · · · · · · · · · · · · · · · · · ·		
(b)	ZenBusiness Inc	1000			
	Enter name of NEW Registered Agent and/or NEW Registere	Unice a	<u>aaress;</u>		
	336 E. College Ave.				
	NEW Registered Office Address:				
	Suite 301				
	Tallabassee , FI	_32301 			
change agent v was/we	imited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	register ability c of the lir	red office and ompany, it is nited liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
_ , ,	Brent Lee Hill	Br	ent Lee F		
_	ture of a member or authorized representative of a member			Printed or typed name of signee	
I here provisi the oblice to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ligations of the change in the registered office address, I din writing of this change.	ree to ac perform d for in hereby c	t in this capa nance of my d Chapter 605, confirm that to	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
Signatu	re of Registered Agent				