Floridal Repairment of State Digision of Corporations Electronic Filing Cover Shee

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	Tc:	
		Division of Corporations
		Fax Number : (850)617-6383
	From:	
		Account Name : FILE RIGHT LLC
2	TE 1085 19 A	Account Number : I20170000091
\sim	변하급	
	4 K	Phone ; (718)878-5811
	77 & C	Fax Number : (718)732-4580
.F.	.5.	
٦	77.44	
	** Enton	the email address for this business entity to be used for future
<u></u>	Sincer	nual report mailings. Enter only one email address please.**
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LLC REGISTERED AGENT CHANGE BLESS DUFF LLC

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INHS18 (2/14)

COVER LETTER

H240000388683

TO: Registration Section Division of Corporations			
SUBJECT: BLESS DUFF LLC	077 171	lability Company	
N	ame of Limited L	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered O	ffice Change and	fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the	following:	
Mark Fuchs			
Name of Person		<u> </u>	
File Right RA Services, LLC			
Firm/Company			2024
1425 37th Street, Suite 201			2024 JAH 3
Address			
Brooklyn, NY 11218			AH 9:
City/State and Zip Code	;		: 38
agent@filescorp.com			
E-mail address: (to be used for future a	nnual report notif	fication)	
For further information concerning this matter	er, please call:		
Sara Ringel	718 at (878-5811	_
Name of Person		Area Code & Daytime Telephone Nu	mber
Mailing Address:		Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations The Centre of Tallahassee	
P.O. Box 6327		2415 N. Monroe Street, Suite 810	
Tallahassee, FL 32314		Tallahassee, FL 32303	
Enclosed is a check for the followi	ng amount:		H240000388683
■ \$25 Filing Fee		\$55 Filing Fee & Certified Copy	

H240000388683

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.

I. N	ame of the limited liability company: BLESS DU	FF LI	_ C				-	
7 (a)	3611 14TH AVENUE, SUITE 600	(b)						
~. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)					
	BROOKLYN, NY 11218					· · · · · · · · · · · · · · · · · · ·		
3	4/12/7021	_ -	1.2100	00156878			-	
3.	4/13/2021 Date of filing/registration in Florida	- _{4.} —		Document number			-	
	Date of Hing/registration in Florida	-₹.						
5. (a)	Business Filing Incorporated							
. (.,,	Registered Agent and Registered Office shown on the records of the	ne Florida D	ept. of State:					
	1200 South Pine Island Rd, Plantation, FL 33326	DUARCO				2		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					2024		
							٠.,	
						2:	•	
					, 	<u>~~</u>	1	
					•	32.	177	
(b)	File Right RA Services, LLC			-		=	,	
	Enter name of NEW Registered Agent and/or NEW Registered	Office addr	<u>c39</u> :		: -	9: 38	·	
						38		
	625 E Twiggs Street, Ste. 110			-				
	NEW Registered Office Address:							
	Tainpa, FL 33602			-				
chang agent was/v	limited liability company is not organized under the law e 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 bility com of the limit	l office and apany, it is ted liabilit	i the business office hereby confirmed to y company or as oth	hat the char	ige(s)		
/s/	Mark Fuchs	Mark	Fuchs, Aut	thorized Person				
Sign	ature of a member or authorized representative of a member			Printed or typed name			_	
I here provisi the ob- to me notific	eby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided rely reflect a change in the registered office address, I h ed in writing of this change.	ee to act in performan I for In Ch nereby con	n this capa nce of my a napter 605 nfirm that	acity. I further agree luties, and I am fam , F.S. Or, if this doc the limited liability o	e to comply iliar with ar cument is be company ha	with the ad accept ing filed is been		
/5/	Mark Fuchs				*********	0.603		
Signa	ure of Registered Agent				H24000038	8683		