## h21000171408

Office Use Only



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## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJI	Shore Thing Marketing LLC					
	Name of Limited Liability Company					
Dear S	Sir or Madam:					
The en	nclosed Registered Agent/Registered Offic	ee Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning this	s matter to the following:				
Jennife	er Corley					
	Name of Person					
Shore	Thing Marketing LLC					
	Firm/Company					
1522 S	tafford Ave					
	Address					
Merritt	Island. F1. 32952					
	City/State and Zip Code	<del></del>				
garben	marketing21@gmail.com					
<u> </u>	E-mail address: (to be used for future annu	al report notification)				
For fu	rther information concerning this matter, p	please call:				
Jennife	er Corley	3056008296 at ( )				
	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 a	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.

	ame of the limited liability company:					
!. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(	(b) Mailing address of limited liability compa  (Note: MAY BE POST OFFICE BO)			
	1522 Stafford Ave		1522 5	Stafford Ave		
	Merrirr Island FL 32952		Merritt Island FL 32952			
	08/11/2021	1.21000171408				
	Date of filing/registration in Florida	4.		Documen	t number	
<i>(</i> )	Jennifer Corley					
. (a)	Registered Agent and Registered Office shown on the records of	f the Floric	la Dept. of	State:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				e 2	
	1522 Stafford Ave					
	Merritt Island , F	L. 32952			FIL 2021 AUG 16 SECON AGE TALLARIA	
(b)	Phillip Garber				To ME	
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office a	ddress:	<del></del>	D 17:12 Estate	
	NEW Registered Office Address:				•	
	1522 Stafford Ave	<u>.</u>				
	Merritt Island p	32952				
range gent ras/w re art	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited line ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the manufacture of a niember or authorized representative of a member by accept the appointment as registered agent and agains of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I	e register iability c of the lir e limited  Jen	red office ompany, nited lia- liability nife Corle	e and the busing it is hereby cobility company company.  Printed or it canacity. I fur	ness office of the registered onfirmed that the change(s) y or as otherwise provided in typed name of signee	