

11/15/24 2:59 PM
 L21000174237
 Division of Corporations

Florida Department of State
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 Electronic Filing Cover Sheet

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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE
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 Fax Number : (561)214-8442

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

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RECEIVED

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DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT CHANGE
 TAMPAMEOW, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help



November 18, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

TAMPAMEOW, LLC
514 HOUSTON ST.
NASHVILLE, TN 37203US

SUBJECT: TAMPAMEOW, LLC
REF: L21000174237

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H24000380730
Letter Number: 324A00025123

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TampaMeow, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Erika A. Easter

Name of Person

Ungerlaw PC/ eMinutes

Firm/Company

11726 San Vicente Blvd., Suite 480

Address

Los Angeles, CA 90049

City/State and Zip Code

eteam@eminutes.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erika A. Easter

Name of Person

at (310) 820-1000

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 amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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. Name of the limited liability company: TampaMeow, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

1212 8th Ave S #102
Nashville, TN 37203

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

PO BOX 331847
Nashville, TN 37203

04/14/2021

L21000174237

3. Date of filing/registration in Florida

4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

REGISTERED AGENT SOLUTIONS, INC.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

2894 REMINGTON GREEN LANE SUITE A
TALLAHASSEE, FL 32308

(b) eResidentAgent, Inc.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

115 N Calhoun St Suite 4

NEW Registered Office Address:

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.



Signature of a member or authorized representative of a member

Erika A. Easter, Authorized Person

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



Signature of Registered Agent