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## L21000180982

Office Use Only



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TARY OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations							
SUBJECT: Built or	n Degign LLC 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:						
Name of Person  Balton Designification							
2107 Global C	<del>/</del>						
Sinch Solid FC 30  City/State and Zip Code	1240						
E-mail address: (to be used for future annua	Design. Co Treport notification)						
For further information concerning this matter, pl	ease call:						
Name of Person	at ( 260 ) 50 - 45 w Area Code & Daytime Telephone Number						
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, 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						

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. Na	ame of the limited liability company: Boilt e	21	Design	1-1 (		
	2107 Global C+		<i>'</i>	7 61		C+
2. (a)	Principal office address of limited liability company:	_ (0)		<del> </del>		ty company:
	(Note: MUST BE STREET ADDRESS)			MAY BE		
	SAMASONG FL 341240		5410	Schn	FL	34240
			. <del></del>			
	4/26/2021		42100	0 180	1982	
3.	Date of filing/registration in Florida	4.		nent numb		
5. (a)	Brett Markley					
. ( )	Registered Agent and Registered Office shown on the records of the	e Florida I	Dept. of State:			
	2107 6-lobal Ct					
	Registered Office Address (MUST BE FLORIDA STREET AD	DRESS)			~3	<b>,</b> •
					023	14. SE
	SArasohA .FL	342	40		2023 AUG 14	
					7	37
(b)	Christopher Sloan		<del></del>		P	7. <del>7.</del> 7.
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	office addi	ress:		œ.	:E
					J.	<b>1</b> 300
	NEW Registered Office Address:		<del> </del>			
	2107 Calobal Ct	_	<u> </u>			
	G1910 Sotia FL	30	340			
			<u>·</u>			
If the li	imited liability company is not organized under the laws or changes are made, the Florida street address of the re	of the S poistered	tate of Florida, it office and the bu	is hereby	confirme fice of the	d that after the registered
agent v	vill be identical. Or, in the case of a Florida limited liabi	ility com	many, it is hereb	v confirme	ed that the	change(s)
the arti	ere authorized by an affirmative vote of the members of ticles of organization of the operating agreement of the lit	ine iimit mited liä	ed hability comp	any or as	omerwise	provided in
,			Danel	6.0	ne	
Signat	ture of a member or authorized representative of a member		Printed	or typed na		•
provisi the obl to merc	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe igations of my position as registered agent as provided f by reflect a stange in the registered office address. I her I in writing of his change.	to act in erforman for in Ch reby con	n this capacity. I see of my duties, a apter 605, F.S. ( firm that the limi	further as and I am J Or, if this ited liabili	gree to con amiliar w document ty compan	mply with the ith and accept is being filed by has been
Signam	unof Registered Agent					
£1	/ 1					