## 121000206107

(Requestor's Name)						
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						



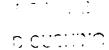


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07/05/22--01023--016 \*\*25.00



Bacrond



## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJ	ECT: 2 STREET APPAREL LLC		12:12: 0			
	Na	me of Limited	d Liability Company			
Dear :	Sir or Madam:					
The e	nclosed Registered Agent/Registered Of	fice Change a	and fee(s) are submitted for fil	ing.		
Please	return all correspondence concerning th	nis matter to t	he following:			
Melis	sa Jones					
	Name of Person					
ZenBı	isiness Inc.					
	Firm/Company	··· ·· · · · · · · · · · · · · · · · ·				
336 E	. College Ave. Suite 301			202		
	Address			2022 JUL		
Tallah	assee, FL 32301			٠٠ . ن تا		
	City/State and Zip Code		<del></del>	<del>1</del>		
14@ze	enbusiness com			9:17		
	E-mail address: (to be used for future and	nual report no	otification)	, i ——		
For fu	orther information concerning this matter	, please call:				
Mel	issa Jones	844 at (	493-6249			
	Name of Person		Area Code & Daytime T	Telephone Number		
	Mailing Address: Registration Section		Street Address: Registration Section			
	Division of Corporations		Division of Corporati			
P.O. Box 6327			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			
	Tallahassee, FL 32314		Tallahassee, FL 3230			
	Enclosed is a check for the following	g amount:				
	□ \$25 Filing Fee		\$55 Filing Fee & Certified C	Сору		

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	ame of the limited liability company: 2 STREET	ΓΑ	PPAREL	LLC	
2. (a)	ROSR IN STATE DOAD RA		(b) 8958 W STATE ROAD 84		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	` /	Mailing address of limite (Note: MAY BE POS	ed hability company:
	#1086		#1086	5	
	FORT LAUDERDALE, FL 33324		FORT	LAUDERDA	LE, FL 33324
	05/03/2021	_	L21000	0206107	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	Registered Agents Inc.				
•	Registered Agent and Registered Office shown on the records of the	ie Flor	ida Dept, of State		
	7901 4th St N				
	Registered Office Address (MUST BE FLORIDA STREET A) STE 300	DDRE	<u>:22)</u>	-	
	St. Petersburg , FL	33702		·	2022 JUL
<b>(</b> b)	Zen Business Inc				1 , -2
. ,	Enter name of NEW Registered Agent and/or NEW Registered (	Office	address:		, <u>C</u> Л
	336 E. College Ave.			<u>.</u>	
	NEW Registered Office Address:			i	·
	Suite 301				
	Tallahassee, FL	32301			
chang agent was/w the ar	limited liability company is not organized under the laws e or changes are made, the Florida street address of the r will be identical. Or, in the case of a Florida limited liab were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the li	registo bility f the l imited	ered office and company, it is imited liability d liability com	the business office hereby confirmed company or as oth pany.	e of the registered that the change(s)
	Brandon Greene	<u> </u>	Brandon Gi		of sizza
I here provise the old to met notific	ature of a member or authorized representative of a member  seby accept the appointment as registered agent and agre- sions of all statities relative to the proper and complete p  soligations of my position as registered agent as provided  refy reflect a change in the registered office address, I he  takin writing of this change.  The property of the change of the change of the change of the change of the change.	<i>rorfor</i>	act in this capa	hities and Lam fan	ee to comply with the