Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GRANT, FRIDKIN, PEARSON, ATHAN & CROWN, P.A.

Account Number : 076402003516 Phone

: (239)514-1000 Fax Number : (239)514-0377

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

Email	Address:				

LLC REGISTERED AGENT CHANGE PASTRY BOUTIQUE LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$55.00

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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.

. Na	me of the limited liability company: Pastry Boutique I	LC					
. (a)	770 W. 70 PLACE		(b)	770 W. 70	0 PLACE		
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(*)		₹	nited liability companion of the compani	-
	HIALEAH, FL 33014			HIALEAF	H, FL 33014		
	May 13, 2021		L	20002232	65		
١.	Date of filing/registration in Florida	_ 4.	_		Document numb	er	
i. (a)	Jack B Malzahn						
· (u)	Registered Agent and Registered Office shown on the records of 2892 Industrial Rd. Suite 1)ept. of Stat	te:	Na	
	Registered Office Address (MUST BE FLORIDA STREET		021	#V/3			
	Bonita Springs, FL 34135			_	_	¥0N	2
	, FI	-				2021 NOV 23 AM 10: 1	AC BADO JO NOISTAIN
							-89 -89
(b)	Enter name of NEW Registered Agent and/or NEW Registered	100			_	3K 65	55. 15. 1.
	Enter name of NEW Registered Agent and/or NEW Registered	Office	add	<u>res9</u> :		-	
	GFPAC Services, LLC					7	-
	NEW Registered Office Address:				_		
	5551 Ridgewood Drive, Suite 501				_		
	Naples . FI	3410	8				
	,			•	_		
thange agent v was/we	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liter authorized by an affirmative vote of the members of the organization or the operating agreement of the	regist ability of the l	ered con limit	l office an ipany, it i ed liabili	nd the business of is hereby confirme ty company or as	fice of the register ed that the change	ed (s)
JR.	& & Word	<u> </u>	Chris	ina S. Wo	ods, Authorized Re	presentative	
-	ture of a member or authorized representative of a member				Printed or typed na	_	
provisi he obi o mer	by accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to d perfoi id for i hereby	act i mai n Cl cor	n this cap uce of my uapter 60. ufirm that	oacity. I further a duties, and I am j 5, F.S. Or, if this the limited liabili	gree to comply with and condition of the condition with and condition of the company has been been been been been been been bee	th the accept g filed een
	AC Services, LLC						
Signatu By:	re of Registered egent Richard C. G	rant.	, Ma	enager			
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