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Office Use Only



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COVER LETTER

SUBJECT: AB FUSION LLC					
Nan	ne of Limited I	iability Company			
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Offi	ice Change and	fee(s) are submitted for filing.			
Please return all correspondence concerning thi	is matter to the	following:			
Melissa Jones					
Name of Person					
ZenBusiness Inc.					
Firm/Company					
336 E. College Ave. Suite 301					
Address	•			2022	
Tallabassee, FL 32301			THE STATE OF THE	11 THE 2205	
City/State and Zip Code			3 00-	~	;;
ra@zenbusiness com				.≖	
E-mail address: (to be used for future ann	ual report notif	ncation)		83	
For further information concerning this matter,	please call:				
Melissa Jones	844 at (493-6249			
Name of Person		Area Code & Daytime Telepho	one Num	ber	
Mailing Address:		Street Address:			
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee	. 010		
Tananassee. FL 32314		2415 N. Monroe Street. Sui Tallahassee. FL 32303	(c 810		
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	me of the limited liability company. AB FUSIC)N L	LC				
2. (a)	1560 CENTRAL AVENUE	(b) 1560 CENTRAL AVENUE					
2. (a) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	M	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	UNIT 323		UNIT 3	323			
	ST. PETERSBURG, FL 33705	- -	ST. PE	TERSBUR	G, Fl	_ 33705	
	05/20/2021	_	L21000	235708			
3.	Date of filing/registration in Florida	4.	Γ	Ocument number	-		
5. (a)	Registered Agents Inc.						
_	Registered Agent and Registered Office shown on the records of the	he Floric	a Dept. of State:		2		
	7901 4th St N			5.	022		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>2)</u>		2022 JUL 1	77	
	STE 300				=	, Table 2	
	St. Petersburg , FL	33702		HASSES	AH 8		
(b)	ZenBusiness Inc			LL :- LL ::	8: 58		
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:				
	336 E. College Ave.						
	NEW Registered Office Address:						
	Suite 301						
	Tallahassee, FL	32301					
change agent w was/we the arti	mited liability company is not organized under the law or changes are made, the Florida street address of the full be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	register bility c f the lir	ed office and ompany, it is l nited liability	the business office hereby confirmed (company or as oth	e of the i that the	registered change(s)	
/s/ ·	Aleksandar Todorovic	Αl	eksandar	Todorovic			
Signat	ure of a member or authorized representative of a member]	Printed or typed name	of signee		
provisi the obli to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have a change in the registered office address, I have a change in the registered of the change.	ze to ac perform for in ereby c	t in this capac lance of my di Chapter 605, onfirm that th	ity. I further agre uties, and I am fam F.S. Or, if this do e limited liability	e to con niliar wi cument i compan	nply with the th and accept is being filed y has been	
Signatu	re of Registered Agent						