L21000247201

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
10/18/31 74					
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COVER LETTER

то:	Registration Division of C							
SUBJ	Surfside Fresh Market LLC							
1,70170	Name of Limited Liability Company							
Dear S	Sir or Madam:							
The er	iclosed Registe	ered Agent/Registered	Office Char	ige and	fee(s) ar	re submitted for filing.		
Please	return all corr	espondence concerning	g this matter	r to the f	followin	g:		
		Deborah V Logal						
		Name of Person						
	s	urfside Fresh Market Ll	LC					
		Firm/Company						
		1401 Gulf Blvd., #5						
		Address			_ _			
	Ine	dian Rocks Beach, FL 3	3785					
		City/State and Zip Coo	de					
		dlogal123@yahoo.com	l					
I	E-mail address	(to be used for future		ert notifi	cation)			
For fu	rther informati	on concerning this mat	tter, please c	:all:				
		Morgan L Myers	at (727)	608-9045		
	Nan	e of Person			Area (Tode & Daytime Telephone Number		
	Mailing Ad Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327			Regis Divis The C 2415	stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303		
	Enclosed is	a check for the follow	ing amoun	t:				
	□ \$25 Filing	, Fee		■ \$5	55 Filing	Fee & Certified Copy		
INHST	8 (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:	urfside Fresh Mar	Market LLC				
2. (a)	1401 Gulf Blvd., #5	(b)	333 39th Ave				
(a) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	Indian Rocks Beach, FI 33785		ST Petersburg Beach, FL 33706				
	October 6, 2021		L21000247201				
3.	Date of filing/registration in Florida	4.	Document number				
5. (a)	MYERS. MORGAN L						
J. ()	Registered Agent and Registered Office shown on the records of	State:					
	819 3RD AVE NW LARGO, FL 33770						
	Registered Office Address (MUST BE FLORIDA STREET)						
	819 3RD AVE NW						
	LARGO, FL E1	33770					
		·					
(b)	Deborah V Logal						
	Enter name of NEW Registered Agent and/or NEW Registered	<u> </u>					
			THE PARTY OF THE P				
	333 39th Ave., St Petersburg Beach, FL 33706						
	NEW Registered Office Address:						
	333 39th Ave						
	St Petersburg Beach	33706	MOOT 12 PH T: 16				
	St Petersburg Beach						
change agent w	mited liability company is not organized under the lay or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cles of organization of the operating agreement of the	registered office bility company.	and the business office of the registered it is hereby confirmed that the change(s)				
Signar			Printed or typed name of signee				
provisia the obli to mere notifica X		performance of v 1 för in Chapter (ny duties, and Lam familiar with and accept 605, F.SOr, if this document is being filed				
Signatur	re of Registered Agent / Deborah V Logal						

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00