## K21000264565

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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## **COVER LETTER**

INHS18 (2/14)

TO:	Registration Section Division of Corporations		
SUBJ	THE CLOSET CURATOR LLC	;	
		Name of Limited	Liability Company
Dear S	Sir or Madam:		
The ea	nclosed Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.
Please	return all correspondence concernin	g this matter to the	e following:
EMIL	Y MAHLER		
	Name of Person		
THE C	CLOSET CURATOR LLC		
	Firm/Company		<del></del>
1000 8	WW 65TH STREET STE 100		
	Address	-	<del></del> _
FORT	LAUDERDALE, FLORIDA 33309		
	City/State and Zip Coo	le	<del></del>
INFO(	@ASGTAX.COM		
Ī	E-mail address: (to be used for future	annual report noti	fication)
For fu	rther information concerning this ma	tter, please call:	
EMIL	Y MAHLER	.561 at (	843-0219
	Name of Person	\	Area Code & Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the follow	ing amount:	
	■ \$25 Filing Fee		S55 Filing Fee & Certified Copy

## • 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.

(a)	1000 NW 65TH STREET STE 100	(b) 1000 NW 65TH STREET STE 100				
` '	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	FORT LAUDERDALE, FLORIDA 33309		FORTIA	UDERDALE, I	·	
		_		- CODERDALE, 1		
	JUNE 7, 2021		L21000264	1565		
	Date of filing/registration in Florida	- 4.	·	Document nu	ımber	<u> </u>
()	EMILY MAHLER					
. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1000 NW 65TH STREET STE 1000			_	2021	
	- No.	33309		_	70Z1 SET -	7
(b)					; =	ا بار معاری عدا
(-,	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:	_	- · ·	i S S
	1000 NW 65TH STREET					6
	NEW Registered Office Address:			_		
	SUITE 100					
	FORT LAUDERDALE, FL,	33309		_		
inge ent w s/we arti	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	vs of the registe ability of the li	ne State of Flered office are company, it	nd the business is hereby confi ty company or	office of the rmed that the	registered change(s)
EN	nelegt mehler	EN	MILY MAHL	ER		
ignat	ure of a member or authorized representative of a member			Printed or types	d name of signee	
_	by accept the appointment as registered agent and agr		at in this area	racity I furthe	or auree to con	uply with the th and accessis being file of has been

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