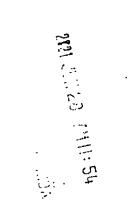
L21000278699

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





200368926182



COVER LETTER

	gistration Section vision of Corporations		
	4805 Lehlo Lane Investment LLC		
SUBJECT	`;		
	Name	of Limited	! Liability Company
Dear Sir or	Madam:		
The enclos	ed Registered Agent/Registered Office	: Change a	and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this	matter to t	he following:
David Dripp)S		
	Name of Person		
4805 Lehlo	Lane Investment LLC		
	Firm/Company		
1317 Edgew	vater Dr. Ste. 2702		
	Address		
Orlando FL	32804		
	City/State and Zip Code		
kmd.proper	ties@erenzia.com		
E-ma	il address: (to be used for future annua	l report no	otification)
For further	information concerning this matter, p	ease call:	
David Dripp	>>\$	407	588-7089
		at (
	Name of Person		Area Code & Daytime Telephone Number
M	ailing Address:		Street Address:
	gistration Section		Registration Section
Di	vision of Corporations		Division of Corporations
P.0	O. Box 6327		The Centre of Tallahassee
Ta	llahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
En	nclosed is a check for the following a	mount:	
×	\$25 Filing Fee	٥	\$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.

Ma	4805 Lehlo Lane I me of the limited liability company:		
	13701 W. Jewell Ave	1317 F	dgewater Dr.
. (4-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Ste. 200-28	Ste. 27	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Lakewood CO 80228	Orland	o FL 32804
	6/15/2021		
(a)	Date of filing/registration in Florida David Foster	4.	Document number
(a)	Registered Agent and Registered Office shown on the records of 133-174th Terrace Drive East	the Florida Dept, of	State:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
	Redington Shores, FL	33708	
(b)	Kelly Miller		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address;	
	1317 Edgewater Dr NEW Registered Office Address:		
		· · · · · · · · · · · · · · · · · · ·	
	Orlando , FL	3 2 8	0 4
nange gent v as/we ne arti	or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia tree authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	registered office bility company, f the limited liab	and the business office of the registered it is hereby confirmed that the change(s) oility company or as otherwise provided in company. ps
herel rovisi e obl	nure of a member or authorized representative of a member by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. I have in this change.	ee to act in this coerformance of t for in Chapter i ereby confirm th	Printed or typed name of signee vapacity. I further agree to comply with the ny duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed nat the limited liability company has been
\ ignatu	re of Registered Agent		