Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000002460 3)))



H250000024603ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

To: 18506176383

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

Lmai I	Address:			
LINGAA	VAUTESS:			

LLC REGISTERED AGENT CHANGE SCHALUECK MARKETING & CONSULTING LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

63

Electronic Filing Menu Corporate Filing Menu

Help

1/9/2025 10:41:48 PST To: 18506176383 Page: 2/2 Fax: 8134365206

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: Schalueck	< Ma	ırketinç	g & Consult	ing LLC	
2. (a)		(b)		12	
(-/ .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited Hability company: (Note: MAY BE POST OFFICE BOX)			
	7901 4th St N STE 300	7901 4th St N STE 300				
	St. Petersburg, FL 33702	_	St. Peter	sburg, FL 33702		
	06/28/21		L2100	0297671		
3.	Date of filing/registration in Florida	4,		Document number		
5. (a)	REGISTERED AGENTS INC.					
	Registered Agent and Registered Office shown on the records of th	e Florida	Dept. of State	: ::	8	
	7901 4TH ST N STE 300				_	
	Registered Office Address (MUST BE FLORIDA STREET AL	1	•	FILED 2025 JAN -9 AN II: 23		
	ST. PETERSBURG,	33702)	•	FILED M	
					20	
(b)	Northwest Registered Agent LI	LC				
	Enter name of NEW Registered Agent and/or NEW Registered C	Office ad	lress:	•	23	
	7901 4th St N			-	>	
	NEW Registered Office Address:			•		
	STE 300					
	St. Petersburg	3702)			
	mited liability company is not organized under the laws age or changes are made, the Florida street address of the					
agent w	ill be identical. Or, in the case of a Florida limited liab	oility co	mpany, it is	hereby confirmed t	hat the change(s)	
	re authorized by an affirmative vote of the members of ties of organization or the operating agreement of the li				erwise provided in	
	at smith	Nat	Smirh			
Signate	ire of a member or authorized representative of a member			Printed or typed name of	of signee	
provision the oblimate to mere potified	y accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pagations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	erforme for in C creby co	ance of my c Chapter 605 Onfirm that t	duties, and I am fam	iliar with and accept	
(m / Vana	Taylor Newman - Assistant	Secre	tary			