7/29/2021

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 : (855)330-1010 Fax Number

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## LLC REGISTERED AGENT CHANGE KUHN COLLECTABLES, LLC

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## 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

l. Na	me of the limited liability company: Kuhn C	ollectable	s, LLC	
2. (a)	7901 4TH ST N	(b) PC	(b) PO BOX 238603	
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	ste 300			
	cocoa, FL 32923	<u>CO</u>	COA, FL 32923	
	06/28/2021	L210	000297813	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	INC AUTHORITY RA			
). (ii)	Registered Agent and Registered Office shown on the records	of the Florida Dept.	of State:	
	390 NORTH ORANGE AVE., STE 2	2300-N	10 S	
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)		
			25° 25°	
	ORLANDO	FL 32801	FILEB PM 1: 42 PM 1: 42 PALLAHASAEE FIGHA	
	Registered Agents Inc.	<del></del>	70 -: 97 -:	
(b)	Enter name of NEW Registered Agent and/or NEW Register	rnd Office address	<u> </u>	
	Ellier hank of 1937 Registered Agent and of 1937 Register	Tru viire accordance		
	7901 4th St N			
	NEW Registered Office Address:			
	STE 300			
	St. Petersburg	FL 33702		
the cha agent w was/we	mited liability company is not organized under the nge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of the companion of the operating agreement	of the registered Hiability compan rs of the limited li	office and the business office of the registered by, it is hereby confirmed that the change(s) hability company or as otherwise provided in ty company.	
<u>کالیں</u> Signal	ure of a member or authorized representative of a member	Riley Pa	Printed or typed name of signee	
I herel provisi the obl to mere	by accept the appointment as registered agent and coms of all statutes relative to the proper and completed agent as provided reflect a change in the registered agent as provided reflect a change in the registered office address, the writing of this change.	ete performance o ided for in Chapto	is capacity. I further agree to comply with the of my duties, and I am familiar with and accep er 605. F.S. Or, if this document is being filed	