

121 000 300 944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

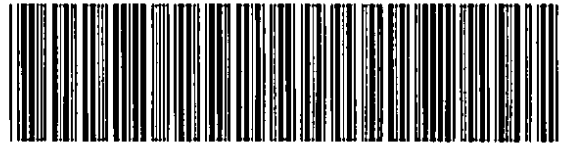
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CCFL HOME, LLC

 Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christine Catizone

 Name of Person

CCFL HOME, LLC

 Firm/Company

3151 S. Princeton Ave.

 Address

Chicago, IL 60616

 City/State and Zip Code

ccatizone@live.com

 E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christine Catizone _____ 312 _____ 848-7084
 _____ at (_____) _____
 Name of Person Area Code & Daytime Telephone Number

Mailing Address:
 Registration Section
 Division of Corporations
 P.O. Box 6327
 Tallahassee, FL 32314

Street Address:
 Registration Section
 Division of Corporations
 The Centre of Tallahassee
 2415 N. Monroe Street, Suite 810
 Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$55 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.

1. Name of the limited liability company: CCFL HOME, LLC

2. (a) CCFL HOME, LLC
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
3151 S. Princeton Ave.
Chicago, IL 60616

(b) CCFL HOME, LLC
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
3151 S. Princeton Ave.
Chicago, IL 60616

3. 06/30/2021
Date of filing/registration in Florida

4. L21000300948
Document number

5. (a) SOUTHERN ATLANTIC LAW GROUP
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
SOUTHERN ATLANTIC LAW GROUP
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
99 6th St., SW
Winter Haven, FL 33880

(b) SOUTHERN ATLANTIC LAW GROUP
Enter name of NEW Registered Agent and/or NEW Registered Office address:
SOUTHERN ATLANTIC LAW GROUP
NEW Registered Office Address:
520 NW 6th St
Winter Haven, FL 33881

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Christine Catizone
Signature of a member or authorized representative of a member

Christine Catizone
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent