## K21000303730

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





900368908139

07/22/21--01016--022 \*\*25.00



## **COVER LETTER**

	gistration Section vision of Corporations						
SUBJECT	NNNI VENTURE LLC						
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name of Limited Liability Company						
Dear Sir or	Madam:						
The enclos	ed Registered Agent/Registered Offi	ice Change a	nd fee(s) are submitted for filing.				
Please retu	irn all correspondence concerning thi	s matter to th	ne following:				
Nicholas I.	Tawil						
	Name of Person	-					
NNN1 Ven	ture LEC						
-	Firm/Company						
9708 Port C	Colony Way						
	Address	 					
Tampa, Flo	rida 33615	_					
	City/State and Zip Code						
nicktawil@	gmail.com						
E-ma	ail address: (to be used for future ann	ual report no	tification)				
For further	r information concerning this matter,	please call:					
Dominic	V. Perry	at ( 216	) 472-3302				
	Name of Person		Area Code & Daytime Telephone Number				
Re Di P.	egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Ei	nclosed is a check for the following	amount:					
	\$25 Filing Fee		\$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.

1. Na	ame of the limited liability company: NNN1 VENTURE	LLC	<u></u>		
2 (a)		ı	(b)		
2. (4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		,	Mailing address of limited lia (Note: MAY BE POST O	ability company:
	9708 Port Colony Way			<u></u>	
	Tampa, Florida 33615	_			
	July 1, 2021		1.210003037	730	
3.	Date of filing/registration in Florida	4.	<del></del>	Document number	
5. (a)	Nicholas A. Tawil				
(a)	Registered Agent and Registered Office shown on the records of the	he Flori	da Dept. of State	- e:	
				_	reg .
					2527
	9708 Port Colony Way			_	· · · · · · · · · · · · · · · · · · ·
	Tampa	33615			<u> </u>
	, FL_			-	רם:
(b)				_	्
()	Enter name of NEW Registered Agent and/or NEW Registered	Office :	iddress:		.c. 50
	Nicholas I. Tawil			·	
	NEW Registered Office Address:	_	<u> </u>	_	
	9708 Port Colony les	1-1		_	
	TAMPAFL	3.	3615		
change agent was/we the art  Signa  I here provise the object to mer	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law accept the appointment as registered agent and agreeions of all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change.	registe bility of f the li limited	red office and company, it is mited liability fliability compensational and the compensation while compensat	of the business office of shereby confirmed that y company or as otherwipany.  Printed or typed name of specifical further carries to	the change(s) vise provided in  ignee
Signatu	re of Registered Agent				
-					