10 01/21, 11:24 AM Electronic Filing Cover Sheet

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> > (((H21000383868 3)))



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To:

Division of Corporations

Fax Number

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 : (323)962-8500

: (323)962-3889

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

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LLC REGISTERED AGENT CHANGE ALEXANDRIA DEVAREAUX LLC

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

SULKER OCT 1 5 2021

COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJ	ALEXANDRIA DEVAREAU	X LLC						
0000	Name of Limited Liability Company							
Dear S	Sir or Madam:							
The er	nclosed Registered Agent/Registered Off	ice Change and feet	(s) are submitted for filing					
Please	return all correspondence concerning th	is matter to the follo	owing:					
Chey	renne Moseley							
	Name of Person							
Lega	Izoom.com, Inc.							
	Firm/Company							
101 (N. Brand Blvd., 10th Floor							
	Address							
Glen	dale, CA 91203							
	City/State and Zip Code							
alexo	devareaux@gmail.com							
I	E-mail address: (to be used for future and	nual report notificat	ion)					
For fu	rther information concerning this matter	, please call:						
Chey	renne Moseley	800 at (773-0888 ext 9724					
	Name of Person	 /	rea Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314					
	Enclosed is a check for the following	; amount:						
	S25 Filing Fee	☑ \$55 F	iling Fee & Certified Copy					

Page: 4 of 4

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: ALEXANDRIA	A DEV	AREAUX L	LC
				ailing address of limited liability company:
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		М	ailing address of limited liability company: f <u>(Note: MAY BE POST OFFICE BOX)</u>
	2650 MUNICIPAL WAY		2650 MU	NICIPAL WAY
	TALLAHASSEE, FL 32304		TALLAH	ASSEE, FL 32304
	07/08/2021		L2100031	2724
3.	Date of filing/registration in Florida	4,		Document number
5. (a)				
V- (-)	Registered Agent and Registered Office shown on the records of the NATASHA A DEVAREAUX	ic Florida	Dept. of State:	2021 0
	Registered Office Address (MUST BE FLORIDA STREET A	DURESS	1	EA A H
	2650 MUNICIPAL WAY			
	TALLAHASSEE , FL	32304		PRI OCT IN PH 3: 18
(b)				9: 18 TATE
(0)	Enter name of NEW Registered Agent and/or NEW Registered (Office ad-	Iress:	
	UNITED STATES CORPORATION AGENTS	S. INC.		
	NEW Registered Office Address:			
	5575 S. Semoran Blvd., Suite 36			
	Orlando, FL_	32822		
the cha agent v was/wa	mited liability company is not organized under the law inge or changes are made, the Florida street address of taill be identical. Or, in the case of a Florida limited lial cre authorized by an affirmative vote of the members of desof organization or the operating agreement of the law in the law	s of the the regis bility co the lim imited l	State of Flor stered office impany, it is ited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signat	ure of a member or authorized represendative of a member			Printed or typed name of signee
I herel provisi the obl to mere porfice	by accept the appointment as registered agent and agree ons of all statutes relative toothe proper and complete projections of my position as registered agent as provided by reflect a change in the registered office address, I have been addressed agent and agent agent and agent and agent and agent agent and agent agent and agent agent agent agent and agent	perform for in (ereby co	ance of my d Chapter 605, onfirm that ti	uties, and I am familiar with and accept F.S. Or if this document is beine filed