121000326025

(Requestor's Name)							
(Address)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
, ,							
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RA Change

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TO:

INHS18 (2/14)

Registration Section

Divi	ision of Corporations						
SURIF CT:	AGILE GLOBAL ENTERPR	ISES LLO	С	·			
Name of Limited Liability Company							
Dear Sir or 1	Madam:						
The enclosed	d Registered Agent/Registered Offi	ice Change	e and fe	e(s) are submitted for filing.			
Please returi	all correspondence concerning thi	s matter to	the fo	llowing.			
Melissa Jo	nes						
	Name of Person			_			
ZenBusiness	Inc.						
	Firm/Company			_			
336 E. Colle	ge Ave. Suite 301						
	Address			-			
Tallahassee,	FL 32301			;;·			
	City/State and Zip Code			_			
ra@zenbusin	ess.com						
E-mail	address: (to be used for future ann	ual report	notific	ation)			
For further i	nformation concerning this matter,	please cal	1:				
Melissa .	Jones	844 at (,	493-6249			
	Name of Person	<		Area Code & Daytime Telephone Number			
	iling Address:			Street Address:			
-	istration Section			Registration Section			
	ision of Corporations			Division of Corporations			
P.O. Box 6327				The Centre of Tallahassee			
1 211	ahassee. FL 32314			2415 N. Monroe Street. Suite 810 Tallahassee. FL 32303			
Enc	losed is a check for the following	amount:					
□ s	□ \$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. N	Jame of the limited liability company: AGILE GL	OB	AL ENT	ERPRISES	LLC		
2. (a)	2747 ENTERPRISE ROAD EAST		(b) 2747 ENTERPRISE ROAD EAST				
2. (a,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	UNIT 19		UNIT :	19			
	CLEARWATER, FL 33759	_	CLEA	RWATER,	FL 33759		
	07/19/2021		L21000	326025			
 (a) 	Date of filing/registration in Florida Registered Agents Inc.	4.	Ī	Document number			
(-	Registered Agent and Registered Office shown on the records of the 7901 4th St N	e Flon	da Dept. of State:	:			
	Registered Office Address (MUST BE FLORIDA STREET AD STE 300	DDRE	(22)				
	St. Petersburg	33702			~2		
(b)	ZenBusiness Inc Enter name of NEW Registered Agent and/or NEW Registered C	\ffice	Adram:		22 J.C.	7)	
	336 E. College Ave.	JIIKE	ud <u>ui ess.</u>			n .	
	NEW Registered Office Address:				= ::	مان مان	
	Suite 301				25		
	Tallahassee, FL	32301					
chang agent was/v the ar	limited liability company is not organized under the laws se or changes are made, the Florida street address of the rewill be identical. Or, in the case of a Florida limited liab were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the liable of the lia	egiste oility of the li imited	ered office and company, it is mited liability I liability comp isa B Olso	the business office hereby confirmed company or as office pany.	e of the registere that the change(herwise provided	ed (s)	
_	ature of a member or authorized representative of a member	a to ~		Printed or typed name	•	h eha	
provi the or to me notifi	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address, I he edfin writing of this change.	e to a perfori for in preby	er in this capa mance of my d Chapter 605, confirm that th	city. I juriner agre luties, and I am fan F.S. Or, if this do he limited liability	ee to comply with niliar with and a cument is being company has be	n ine iccept filed ien	

Signature of Registered Agehi