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Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

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

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

Email	Address:	
Linait	Mudicas.	

LLC REGISTERED AGENT CHANGE FINANCIAL LITERACY ADVOCATES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

SEP 2 8 2021

A. I.UMT

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	ame of the limited liability company: Financ	ial Literacy	/ Advocates, LLC
2. (a)		(b)	
- . (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)
	07/26/21	L210	000338291
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	, INC AUTHORITY RA		202
	Registered Agent and Registered Office shown on the record	ds of the Florida Dept.	SECRETARY 2021 SEP 27
	390 NORTH ORANGE AVE., STE	2300-N	T 40 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDRESS)	# ~ !
	ORLANDO	_{.FL} 32801	AM 10: 1
(h)	Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered Agent	tered Office address:	
	7901 4th St N		
	NEW Registered Office Address:		···
	STE 300		
	St. Petersburg	. FL 33702	
the ch agent was/w	limited liability company is not organized under the ange or changes are made, the Florida street addressill be identical. Or, in the case of a Florida limite tere authorized by an affirmative vote of the membiciles of organization or the operating agreement of	ss of the registered ed liability compan ers of the limited li	office and the business office of the registered by, it is hereby confirmed that the change(s) lability company or as otherwise provided in ty company.
Sion	Rither tak ature of a member or authorized representative of a member	- Riley Pa	Printed or typed name of signee
I here provis the ob- to me)	why accept the appointment as registered agent and ions of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office addressed in yeiting of this change.	otete performance o wided for in Chapte	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