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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I2009000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE TROPICAL PALMS STUDIO LLC

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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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

. Na	une of the limited liability company.	ns Studio LLC	
. (a)		(b)	
	Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	07/28/21	L2	1000341775
	Date of filing/registration in Florida	4.	Document number
(a)	ZenBusiness Inc		
. ()	Registered Agent and Registered Office shown on the record	ls of the Florida De	pt. of State
	336 E. College Ave.		
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	
	STE 301		
	Tallahassee	. FL_32301	
101	Registered Agents Inc		202
	Enter name of <u>NEW Registered Agent</u> and or <u>NEW Regist</u>	ered Office addres	ZOZ3 AUG
	7901 4th St N		S 23
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg	. IFL. ³³⁷⁰²	1
e cha ent w as/we e artic	mited liability company is not organized under the nge or changes are made, the Florida street addressell be identical. Or, in the case of a Florida limite re authorized by an affirmative vote of the memberles of organization or the operating agreement of	s of the registers d liability comp ers of the limited the limited liab	ed office and the business office of the registers any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in ility company.
· · · · · · · · · · · · · · · · · · ·	tre of a member of authorized representative of a member	Robin Jo	Pented or typed name of signee
ovisie e obli mere	y accept the appointment as registered agent and ons of all statutes relative to the proper and compl gations of my position as registered agent as prov ly reflect a change in the registered office address I in writing of this change.	agree to act in s lete performanc ided for in Chaj A hereby confi	ius capacity. I further agree to comply with the of my duties, and I am familiar with and accepter 605, F.S. Or, if this document is being file rm that the limited liability company has been

David Roberts

- Assistant Secretary