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COVER LETTER

TO: Registration Section Division of Corporations

A&R REAL STATE INVESTMENT, LLC.
SUBJECT:

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HEATHER A TULLOCH, CFO

Name of Person

DIRECT POINT ACCOUNTANT FIRM, CORP.

Firm/Company

8455 WEST OAKLAND PARK BLVD.

Address

SUNRISE, FL. 33351

City/State and Zip Code

FINANCE@DIRECTPOINTACCOUNTANT.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Area Code & Daytime Telephone Number
Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

S25 Filing Fee

□ S55 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.

(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(1	(د ۱	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	(<u>Sole: NUST DE STREET ADDRESS</u>) 8213 MIZNER LANE		8213 MIZN	
	BOCA RATON, FL, 33433		BOCA RA'	FON. FL. 33433
	08/03/2021		1.210003503-	48
	Date of filing/registration in Florida	4.		Document number
(a)	MJ TAXES AND MORE INC.			
()	Registered Agent and Registered Office shown on the records o JOHANNA GARCIA	f the Florid	a Dept. of State	:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	2754 WEST ATLANTIC BLVD.			
	POMPANO BEACH, F	L_33069		
(b)	DIRECT POINT ACCOUNTANT FIRM, CORP			102
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office ac	Idress:	
	HEATHER A TULLOCH, CFO	_		HISTER FL
	<u>NEW</u> Registered Office Address:			File N
	8455 WEST OAKLAND PARK BLVD.			FLEF
	SUNRISE, F	33351		

Signature of a member or authorized representative of a member

led or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Age

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **FILING FEE: \$25.00**