L21000361900

(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
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COVER LETTER

	egistration Section ivision of Corporations			
SUBJEC	Merge 56 Hookah LLC "Palm C	Coffee House"		
эовите.	Name of Limited Liability Company			
Dear Sir c	or Madam:			
The enclo	sed Registered Agent/Registered	l Office Change a	nd fee(s) are submitted for filing.	
Please ret	urn all correspondence concernir	ng this matter to th	ne following:	
Hamza Ale	qudah			
	Name of Person			
Merge 56	Hookah LLC "Palm Coffee House"			
	Firm/Company			
110 W Dro	ew St			
	Address			
Plant City,	FL 33563			
•	City/State and Zip Co	ode		
palmhooka	ah813@gmail.com			
E-m	ail address: (to be used for future	annual report no	tification)	
For furthe	er information concerning this ma	atter, please call:		
Hamza Ale	qudah	813 at (525-3119	
	Name of Person		Area Code & Daytime Telephone Number	
R D P	lailing Address: egistration Section division of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
E	nclosed is a check for the follow	wing amount:		
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy	
INHS18 (2	/14)			

2021 MCY 15 PM 12: 23

October 16, 2021

HAMZA ALQUDAH 110 W DREW ST PLANT CITY, FL 33563

SUBJECT: MERGE 56 HOOKAH LLC "PALM COFFEE HOUSE" LLC

Ref. Number: L21000361900

We have received your document for MERGE 56 HOOKAH LLC "PALM COFFEE HOUSE" LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

You failed to list the current registered agent information in the space provided.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist III

Letter Number: 421A00025232

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. Na	ame of the limited liability company: MERGE 56 HO	OKAH LLC "	PALM COFFEE HOUSE"
2. (a)			10 W DREW ST PLANT CITY, FL 33563
~. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10819 N 56TH ST., TEMPLE TERRACE, FL.33617		
			1
_			1000361900
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	ALQUDAH, HAMZAH A		
	Registered Agent and Registered Office shown on the records of	f the Florida De	ept. of State:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	202
	110 W DREW ST	ADDRU.SJ	2021110" 15
	PLANT CITY E	L 33563	
		L	9 111
(b)			
(-,	Enter name of NEW Registered Agent and/or NEW Registere	d Office addre	:::::::::::::::::::::::::::::::::::::
	NEW Registered Office Address:		_
	10819 N 56th St		
	· · · · · · · · · · · · · · · · · · ·	 :	
	Temple Terrace	33617	
	······································	1	
change agent v was/wo	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited libere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered of the limite bilinited liab	office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in oility company.
Cima	ture of a member or authorized representative of a member	- HAMZ	A AL QUDAH Printed or typed name of signce
I here	by accept the appointment as registered agent and ag	ree 10 act in	this canacity. I further agree to comply with t
provisi the obl to meri	ons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	e performanc ed for in Cha hereby confi	e of my duties, and I am Jamiliar with and acc pter 605, F.S. Or. if this document is being fi- irm that the limited liability company has beer
Signatu	re of Registered Agent		