L21000397890

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



600373049086

09/16/21--01004--020 **25.00



COVER LETTER

| TO: | Registration Section Division of Corporations | | a i | | | | |
|--------------------------|--|---------------------------|--------------------------------------|--|--|--|--|
| | ECT: 2430 Temple Grove Ln LLC | | | | | | |
| SUBJI | Name of Limited Liability Company | | | | | | |
| Dear S | ir or Madam: | | | | | | |
| The en | closed Registered Agent/Registered Off | ice Change an | I fec(s) are submitted for filing. | | | | |
| | return all correspondence concerning th | _ | | | | | |
| | | | J | | | | |
| Tase | en Ranginwala | | | | | | |
| | Name of Person | | | | | | |
| | | | | | | | |
| | Firm/Company | | _ | | | | |
| 105 | 05 60th Avenue Ant 108 | | | | | | |
| 103- | 05 69th Avenue Apt. 108 Address | | | | | | |
| | | | | | | | |
| Fore | st Hills, NY 11375 | | | | | | |
| | City/State and Zip Code | | | | | | |
| tase | eenr1@gmail.com | | | | | | |
| E | E-mail address: (to be used for future ann | ual report noti | fication) | | | | |
| For fu | ther information concerning this matter, | , please call: | | | | | |
| Tase | en Ranginwala | at (646 | , 978-0241 | | | | |
| | Name of Person | ai (| Area Code & Daytime Telephone Number | | | | |
| | STREET/COURIER ADDRESS: | M | IAILING ADDRESS: | | | | |
| Registration Section Reg | | | istration Section | | | | |
| • | | | rision of Corporations | | | | |
| Clifton Building | | P.O. Box 6327 | | | | | |
| | 2661 Executive Center Circle Tallahassee, Florida 32301 | allahassee, Florida 32314 | | | | | |
| | Enclosed is a check for the following | amount: | | | | | |
| | ■ \$25 Filing Fee | 0 9 | S55 Filing Fee & Certified Copy | | | | |
| INHSI | 8 (2/14) | | | | | | |

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) | 2430 Temple Grove Ln | (b) | | |
|------------------------------|--|--|--|--|
| (a) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | (0). | M | lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | Kissimmee, FL 34741 USA | <u> </u> | | |
| | 09/07/2021 | – - L | 210003 | 97890 |
| | Date of filing/registration in Florida | 4. | ! | Document number |
| (a) | Taseen Ranginwala | | | |
| (a) | Registered Agent and Registered Office shown on the records of | the Florida D | ept, of State: | : |
| | 105-05 69th Avenue | | | |
| | Registered Office Address (MUST BE FLORIDA STREET) | (DDRESS) | | 2021 |
| | Apt. 108 | | | FILED 2021 SEP 16 AH 10: 45 |
| | Forest Hills | 11375 | | . 6 |
| | , FL | | | %° ≘ m |
| (b) | Registered Agents Inc. | | | a D |
| ` ' | Enter name of NEW Registered Agent and/or NEW Registered | Office addr | 21 : | £5 |
| | 7901 4th St N | | | S |
| | NEW Registered Office Address: | | | |
| | STE 300 | | | |
| | St. Petersburg | 33702 | | |
| cha ent v s/we arti | imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lizere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law law in the | the register ability comes of the limited limited lia | red office pany, it is ad liability bility comp | and the business office of the registe hereby confirmed that the change(s) company or as otherwise provided in |
| visi obl | by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete igations of my position as registered agent as provided ely reflect a change in the registered office address, I h | performan 1 for in Ch | ce of my d apter 605, | uties, and I am familiar with and acc F.S. Or, if this document is being fil |

Signature of Registered Agent