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COVER LETTER *

TO: Registration Section Division of Corporations	•	
Felrath, LLC SUBJECT:		
	Name of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concernin	ig this matter to the following:	
Kyle Felty		
Name of Person		
Law Office of Kyle Felty, P.A.	22	27
Firm/Company	22 OCT 11	<u></u>
725 N. Hwy A1A, C112		- SE - SE
Address		
Jupiter, FL 33477	37	7 ·
City/State and Zip Co	ode	
kyle@kylefelty.com		
E-mail address: (to be used for future	e annual report notification)	
For further information concerning this ma	atter, please call:	
Kyle Felty	561 507-0352 at (
Name of Person	Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	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 follo	wing amount:	
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	
INHS18 (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.

I. Na	ame of the limited liability of	Felrath, LLC			
2. (a)			(t	p)	
	•	of limited liability company: STREET ADDRESS	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.	09/23/2021 Date of filing/reg	stration in Florida	4.	1.2100042	21259 Document number
5. (a)	Registered Agent and Registere Law Office of Kyle Felty, P	d Office shown on the records of the	ne Florid	a Dept. of S	State:
	_	IUST BE FLORIDA STREET A	DDRESS	<u>5)</u>	<i>N</i> ≥
	1983 PGA Blvd #103				22 OCT 1
	Palm Beach Gardens	, FL	33408		<u> </u>
(b)	Enter name of <u>NEW Registered</u> Law Office of Kyle Felty, F	Agent and/or NEW Registered ()ffice ad	dress:	- AH 5: 38
	NEW Registered Office Addre	ss:			
	725 N. Hwy A1A, #C112				
			ì		
	Jupiter ————————————————————————————————————	, FL	33477		
change agent was/withe art Signo I here provis the obton mer notifie	e or changes are made, the levill be identical. Or, in the ere authorized by an affirm icles of organization or the sture of a member of authorized to by accept the appointment.	lorida street address of the rease of a Florida limited liabitive vote of the members of operating agreement of the liabitive vote of a member as registered agent and agreegistered agent as provided registered office address. I he	egister oility co the lin imited	ed office ompany, inited liability of Liability of the control of	Florida, it is hereby confirmed that after the and the business office of the registered it is hereby confirmed that the change(s) will company or as otherwise provided in company. Printed or typed name of signed capacity. I further agree to comply with the new duties, and I am familiar with and accepted to the limited liability company has been at the limited liability company has been