Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000173265 3)))



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To:

Division of Corporations

Pax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : 120220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE TRAN-RE-FLORIDA LLC

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Corporate Filing Menu

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COVER LETTER	÷ ·
TO: Registration Section Division of Corporations	
TRAN-RE-FLORIDA LLC SUBJECT:	
Name of Limited Liability Company	/
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submit	tted for filing.
Please return all correspondence concerning this matter to the following:	
LOVETTE DOBSON	
Name of Person	
INCFILE.COM LLC	
Firm/Company	
17350 STATE HWY 249 #220	
Address	
HOUSTON, TEXAS 77064	
City/State and Zip Code	
EFILE1234@INCFILE.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
LOVETTE DOBSON 888 462-3453 at ()	
Name of Person Area Code & I	Daytime Telephone Number
	Section Corporations of Tallahassee nroe Street, Suite 810

☐ \$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

■ \$25 Filing Fee

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY (((H23000173265 3)))

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. N	ame of the limited liability company:	RIDA L	LC		
J. (L)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	N		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	2787 HUFF DR		2787 HUF	F DR	
	PLEASANTON, CA 94588		PLEASAN	TON, CA 94588	
	09/27/2021		L210004235	23	
3.	Date of filing/registration in Florida	4.		Document number	
5 (0					
J. (a	Registered Agent and Registered Office shown on the records of	of the Flor	ida Dept. of State	- e:	
	LEGALINC CORPORATE SERVICES INC.				
	Registered Office Address (MUST BE FLORIDA STREE	LADDRE	22)	-	
	476 RIVERSIDE AVE.				
	JACKSONVILLE	32202		2023 HAY -9	
	JACKSONVILLE ,, F	?L		- - .	
71.3				7	
(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office	address:	·	
					
	REPUBLIC REGISTERED AGENT LLC			- 2:	
	NEW Registered Office Address:		·		
	1150 Nw 72nd Ave Tower I Ste 455			0°	
	Miami, I	FL_33126		_	
chang agent was/v the ar Sign I her provi	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the ature of a member or authorized representative of a member selvy accept the appointment as registered agent and a sions of all statutes relative to the proper and completely reflect a change in the registered office address, and in writing of this change.	he regist liability s of the l ne limite H	ered office and company, it is imited liability d liability con- uyen Tran	d the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in apany. Printed or typed name of signee	

Signature of Registered Agent