## L21000428627

(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:							

Office Use Only



000438745690

10/31/24--01013--011 \*\*25.00 FILED \*\*25.00 FILED \*\*25.00

## **COVER LETTER**

Division of Corporations	
Miller Family Industries, LLC SUBJECT:	
	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chan	age and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Paul Miller	
Name of Person	
Rosati's Pizza	
Firm/Company	
7138 Barnsbury Ln	
Address	
Naples, FL 34109	
City/State and Zip Code	<del></del>
eatrosatispizza@gmail.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please of	call:
Paul Miller 2.	39 888-1138
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 following amoun	t:
S25 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.

1. N	ame of the limited liability company: Miller Family Indu	istries.		·		
2. (a)			(b) Paul Miller			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of (Note: MAY BE		
	7138 Barnsbury Ln		7138 Barn	isbury Ln		
	Naples, FL 34109	_	Naples, FI	L 34109		
	September 29, 2021		1.21000428	627		
3.	Date of filing/registration in Florida	4.		Document nurr	nber	
5. (a)	Stephen J. Minosky					
υ. (u)	Registered Agent and Registered Office shown on the records of the	he Flori	da Dept. of Stat	te:		
	Stephen J. Minosky					
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE	SS)	_		
(b)	400 5th Avenue S Suite 301				<u> </u>	~
	Naples . FL	34102	<del>-</del> .	<del>-</del>		٦)
	Paul Miller		•		1.5.S	Ē
(- /	Enter name of NEW Registered Agent and/or NEW Registered	Office :	iddress:	<b>_</b>		
	Paul Miller .				TOPHO.	
	NEW Registered Office Address:			_	3. <del>7</del>	
	7138 Barnsbury Ln			_		
	Naples , FL	34109		_		24 OC
chang agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the rwill be identical. Or, in the case of a Florida limited lial tere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	registe bility of the li imited	red office an company, it i mited liabilit	d the business of s hereby confirm ty company or as	office of the ned that the s otherwise	d that after the registered change(s)
Signa	iture of a member or authorized representative of a member			Printed or typed r	name of signe	-
provis the ob to mer	by accept the appointment as registered agent and agreions of all statutes relative to the proper and complete pligations of my position as registered agent as provided selv reflect a change in the registered office address. I had in writing of this change.	e to a perfori for in ereby	et in this cape nance of my Chapter 605 confirm that	acity. I further a duties, and I am 5, F.S. Or, if thi the limited liabi	agree to co familiar w s document lity compar	mply with the ith and accep is being filed ny has been

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

Signature of Registered Agent