Fax: 8134365206

Division of Corporations



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.

(((H230003591743)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

ृEmail Address:_



LLC REGISTERED AGENT CHANGE LIT ECOMMERCE NINJAS LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu-

Help

OCT 16 2023

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.

L. Na	une of the limited liability company.	E NINJAS LLC	
2. (a)		(b)	
. , ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Marling address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	09/30/21	L2100043	0078
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	UNITED STATES CORPORATION AGENTS, INC.		
.,	Registered Agent and Registered Office shown on the records of		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
	476 RIVERSIDE AVE.		_
	JACKSONVILLE , FL	32202	
			2023 OCT 13
(b)	Registered Agents Inc		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	
	7901 4th St N		S PM
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg	33702	
the cha agent v was/we	mited liability company is not organized under the layinge or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members called of organization or the operating agreement of the	ws of the State of I the registered offi ability company, it of the limited liabil	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
Signal	ure of a member or authorized representative of a member		Printed or typed name of signee
I herei provisi the obl to mere notifica A	by accept the appointment as registered agent and agrouns of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. It is writing of this change. The position of this change. The position of this change.	performance of m d for in Chapter 60 hereby confirm tha	nacity. I further agree to comply with the
Signatu	e of Registered Agent		