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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI	DRILLING SMART LLC				
		Name of Limited Liability Company			
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to the	following:		
KENN	Y GABRIEL PUJOLS CABRERA				
	Name of Person		<u> </u>		
DRILL	ING SMART LLC				
	Firm/Company		_		
3059 Y	OUNGFORD				
	Address		_		
ORLA	NDO, FL 32824				
	City/State and Zip Code		_		
DRILL	NGSMARTLLC@GMAIL.COM				
Е	-mail address: (to be used for future ann	ual report notifi	cation)		
For fur	ther information concerning this matter.	please call:			
KENNY	GABRIEL PUJOLS CABRERA	804 at (297 5634		
	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	amount:			
	☐ \$25 Filing Fee	■ \$5	5 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: DRILLING SMAI	RT LLC	
2. (a)	3059 YOUNGFORD ORLANDO, FL 32824	(b) 3059 YO	UNGFORD ORLANDO, FL 32824
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	OCTOBER 5 2021	L21000439	<u> </u>
3.	Date of filing/registration in Florida GABRIELA MARTINEZ	4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of the 158 LA PAZ DR Registered Office Address (MUST BE FLORIDA STREET A		
	KISSIMMEE, FL_	34743	
(b)	KEILA BERENICE PUJOLS CABRERA		
()	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> (Office address:	- 3 - 3
	3059 YOUNGFORD ST		
	NEW Registered Office Address:		
	ORLANDO FL_	32824	ANIO: 48
thange igent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the r will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	registered office an bility company, it is Tthe limited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
Ken		KENNY GABRI	IEL PUJOLS CABRERA
I herei provisi the ohl to mere notified	we of a member of authorized representative of a member by accept the appointment as registered agent and agreed ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. I have in writing of this change.	e to act in this cape verformance of my c for in Chapter 605 ereby confirm that (Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept is. F.S. Or, if this document is being filed the limited liability company has been