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(Re	questor's Name)				
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SECRETARY OF STATE
PALLAHASSEE, FLORES

COVER LETTER

TO: Registration Section Division of Corporations	
MATTHEW ADAM NIEDOBA, LLC SUBJECT:	
	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 concerning this n	natter to the following:
MATTHEW A. NIEDOBA	
Name of Person	
MATTHEW ADAM NIEDOBA, LLC	
Firm/Company	
7825 CROSSWATER TRAIL, C1101	
Address	
WINDERMERE, FL 34786	
City/State and Zip Code	
MATTHEWNIEDOBA@OUTLOOK.COM	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ease call:
MATTHEW A. NIEDOBA	407 408-7140 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 Tallahassec 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following an	nount:
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

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	me of the limited liability company: MATTHEW ADA	M NIE)CI.	DBA LLC				
2.	(a)	MATTHEW A. NIEDOBA	(b) MATTHEW A. NIEDOBA						
,	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(-,	Mailing address of limited liability comp (Note: MAY BE POST OFFICE BO			•	
		7825 CROSSWATER TRAIL, C1101			7825 CRC	OSSWATER TRAIL,	, C1101		
		WINDERMERE, FL 34786			WINDERMERE, FL 34786				
		10/18/2021		1	.21000452	913			
3.		Date of filing/registration in Florida	4.	-		Document numbe	;г	.	
5,	(a)								
٥,	(4)	Registered Agent and Registered Office shown on the records of the MATTHEW A. NIEDOBA	ıc Flori	da	Dept. of Stat	te:			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				-			
		8725 CROSSWATER TRAIL, C1101							
		WINDERMERE , FL	34786			-	77. 28		
	(b)					2021 NOV SECRET			
,	ω,	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_	FIL INOV -2 CRETARY LAHASSI			
		MATTHEW A. NIEDOBA					المرابعة مرابعة المرابعة الم		
		NEW Registered Office Address:				- STA PO			
		7825 CROSSWATER TRAIL, C1101				_	1		
		WINDERMERE FL	34786				•		
cha age was the	nge nt w /we artic	mited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of eles of organization or the operating agreement of the liability of a member or authorized representative of a member	egiste oility c the lin mited	rec on mit lia	l office an pany, it is ed liability bility con	d the business offices s hereby confirmed as company or as of	ce of the registe I that the change therwise provide	red e(s)	
pro the to n noti	visio obli iere fied	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he lin writing of this change.	e to ac erforn for in ereby c	et i. nar Ch eon	n this capt ace of my to apter 605 firm that t	acity. I further agr duties, and I am far 5, F.S. Or, if this do the limited liability	ree to comply wi miliar with and ocument is being company has b	th the accept g filed een	
PIBL	រណាវ	e of Registered Agent							