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## COVER LETTER

TO: Registration Section Division of Corporations					
BIG GUAVA HOMES LLC					
Nar	ne of Limited L	iability Company			
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Off	fice Change and	fee(s) are submitted for filir	ng.		
Please return all correspondence concerning th	is matter to the	following:			
Sydney Grice					
Name of Person		<del>_</del>			
Anderson Business Advisors					
Firm/Company		<del></del>	<b>787</b>		
3225 McLeod Drive, #100			2022 OCT 18 AN 10: 35		
Address		<del></del>	AHA:		
Las Vegas, NV 89121			SEE	)	
City/State and Zip Code		<del></del>	FATE		
ra@andersonadvisors.com					
E-mail address: (to be used for future am	ual report notif	īcation)			
For further information concerning this matter	, please call:				
Sydney Grice	800 at (	7064741			
Name of Person	ar (	Area Code & Daytime Tel	tephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following	; amount:				
<b>☑</b> \$25 Filing Fee	□ \$:	55 Filing Fee & Certified Co	ру		

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. Na	me of the limited liability company: BIG GUAVA F	HOME	SL	LC				
2. (a)	4203 Fairway Run	(b) 4203 Fairway Run						
(,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (	, _		Mailing address (Note: MAY	of limited liab	-	
	Tampa, FL 33618	_	_	ampa	, FL 33618	<del></del>		<del>-</del> -
	10/21/2021	_ <del>-</del>	L2	210004	158088			
3.	Date of filing/registration in Florida	4.			Document n	umber		
5. (a)	ZENBUSINESS INC.				_			
	Registered Agent and Registered Office shown on the records of the	he Florid	a De	ept. of Sta	ite:			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES:	Sį		<del>-</del>	<u>@</u>	282	
	336 E. COLLEGE AVE. SUITE 301					ALI	200	T)
	TALLAHASSEE . FL	32301			_	AHA	2022 OCT 18	
(b)	Anderson Registered Agents, Inc.	··		<u> </u>	_	SSEE,	AM 10: 35	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office ad	<u>ldre</u>	<u>ss</u> :		PE	မ	
	625 E. Twiggs Street, Suite 110					; (;	O,	
	NEW Registered Office Address:	•			_			
	Tampa FL_	33602	ļ		_			
the cha agent w was/we the arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited lia tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regi bility co I the lin	ister omp nite	red offic pany, it d liabili	ce and the busi is hereby conf ty company or	iness office firmed that t	of the	registered ange(s)
Sydn	ey Grice In a company of the control	Sy	dne	ey Grid	e			
	ure of a member or authorized representative of a member				Printed or type			
provision the obli to merc	by accept the appointment as registered agent and agree 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 he is a writing of this change.  It is the registered of the change in the registered of the registered o	verform l för in s	iane Che	e of my ipter 60	duties, and L 5, F.S. Or, if	am familiar this docume	r with ent is i	and accept being filed

Signature of Registered Agent