(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:					
1 3 - 1 1 1 2					
J DENNIS					
JUL 21 2023					

Office Use Only



800408952478

05/18/23--01006--023 **25.00

ቓ

COVERLETTER

TO:	Registration Section Division of Corporations			
SUBJI	ECT: P-SKS-I HOLDING LLC			
SUBJI	Name of Limited Liability Company			
Dear S	ör or Madam:			
The en	iclosed Registered Agent/Registered Offic	e Change and	fee(s) are submitted for filing.	
Please	return all correspondence concerning this	matter to the	following:	
Chey	renne Moseley			
	Name of Person			
Lega	Izoom.com, Inc.			
	Firm/Company		-	
101 I	N. Brand Blvd., 11th Floor			
	Address			
Glen	dale, CA 91203			
	City/State and Zip Code			
	da@gmail.com			
Ī	i-mail address: (to be used for future annu	al report notif	ication)	
For fu	rther information concerning this matter, p	olease call:		
Chey	enne Moseley	800	773-0888 ext 9724	
P#	Name of Person		Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Habassee, Florida 32314	
	Enclosed is a check for the following	amount:		
	SS25 Filing Fee	U 8:	55 Filing Fee & Certified Copy	
INHS1	8 (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.

me of the limited liability company: P-5K5-1 Fiv	OLDING LLC		
	(b)		
	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
8548 GEDDES LOOP	8548 GEDDES LOOP		
ORLANDO, FL 32836	ORLANDO, FL 32836		
10/27/2021	L21000467090		
Date of filing/registration in Florida	4. Document number		
Registered Agent and Registered Office shown on the records of a UNITED STATES CORPORATION AGENTS	S, INC.		
Registered Office Address (MUST BE FLORIDA STREET A 476 RIVERSIDE AVE.			
JACKSONVILLE EL	32202 HAY COT		
Kalpana Nallavolu NEW Registered Office Address:	F STATE PORATION:		
O 4 4-	32836		
imited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia			
	Krishna Chada Printed or typed name of signee		
by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I	ree to act in this capacity. I further agree to comply with the eperformance of my duties, and I am familiar with and accepted for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been Kalpana Nallavolu		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 8548 GEDDES LOOP ORLANDO, FL 32836 10/27/2021 Date of filing/registration in Florida Registered Agent and Registered Office shown on the records of UNITED STATES CORPORATION AGENT Registered Office Address (MUST BE FLORIDA STREET: 476 RIVERSIDE AVE. JACKSONVILLE Enter name of NEW Registered Agent and or NEW Registered Kalpana Nallavolu NEW Registered Office Address: 8548 Geddes Loop Orlando FI Imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light of the proper and complete the appointment as registered agent and age into a full standes relative to the proper and complete they accept the appointment as registered agent and age into a full standes relative to the proper and complete they accept the appointment as registered agent as provide address of my position as registered agent as provided in vertical of this change.		