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COVER LETTER

TO: **Registration Section Division of Corporations**

Smore Shack LLC -----

SUBJECT:

Name 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 matter to the following:

Walter Anthony Wible

Name of Person 1.36 Smore Shack LLC Firm/Company . 🗤 A11 8: 1 3327 Anchor Bay Tfl Address 02 Bradenton FL 34211 City/State and Zip Code

tonywible@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Walter Anthony Wible	973 at (500 8797
Name of Person	··· (. <u></u> ··· (. <u></u>	Area Code & Daytime Telephone Number
Mailing Address:		Street Address:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303

Enclosed is a check for the following amount:

S25 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.

i) [3327 Anchor Bay Trl		(b)	3327 Anchor Bay Trl
· -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	Bradenton FL 34211		-	Bradenton FL 34211
	November 1, 2021		- شا	1.21000472588
	Date of filing/registration in Florida	4.		Document number
a)	MORIARTY, BRENDEN S			
	Registered Agent and Registered Office shown on the records of	the Flori	ida D	Dept. of State:
	1001 THIRD AVENUE WEST			
	Registered Office Address (MUST BE FLORIDA STREET) Suite 650	ADDRE	<u>SS)</u>	2
	Bradenton, FI	34205		
)	Walter Anthony Wible			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office :	addr	
	3327 Anchor Bay Trl			$\mathbf{\overline{\omega}}$ $\mathbf{\overline{m}}$
	NEW Registered Office Address:			
	Bradenton Fl	_ <u>34211</u>		
ge t w wei	mited liability company is not organized under the la or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registe ability (of the li	ered com mite	d office and the business office of the registered mpany, it is hereby confirmed that the change(s ited liability company or as otherwise provided
	the Mig	W	alter	er Anthony Wible
1	ure of a member or authorized representative of a member			Printed or typed name of signee

1/0 L \angle Signature of Registered Agent

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Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 **FILING FEE: \$25.00**