## L31000480781

(Requestor's Name)			
(Address)			
(Address)			
, ,			
(City/State/Zip/Phone #)			
(Only State Liph Holle #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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IÀLLAHASSEE FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: CWC Entertainment LLC	
Name of Lin	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
Donna Piano	
Name of Person	
CWC Entertainment LLC	
Firm/Company	
5240 Lawton Ave	
Address	
North Port FI 34288	
City/State and Zip Code	
dpiano26@outlook.com or erazywomencountry@gmail.ec	om
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please of	call:
Donna Piano 4.	84 201-4877
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	t:
■ \$25 Filing Fee	☐ \$55 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.

. (a)	5240 LAWTON AVE	(b)	5240 LAWTON AVE
. (-) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	NORTH PORT FL 34288		NORTH PORT FL 34288
	11/08/2021	 [:	21000480781
	Date of filing/registration in Florida ZENBUSINESS INC.	4.	Document number
. (a)	Registered Agent and Registered Office shown on the records o 336 E. COLLEGE AVE.	f the Florida D	Pept. of State:
	Registered Office Address (MUST BE FLORIDA STREET SUITE 301	ADDRESS)	POLICI 30 AM II: 20 TALLAHASSEE. FLORIDA
	TALLAHASSEE, F	L_32301	SEÉ. FLORID
(b) .	Donna Piano		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 5240 Lawton Avc	d Office addr	ess:
	NEW Registered Office Address:	_	
	North Port, F	L_34288	
hange gent w vas/we	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registered iability com of the limite	office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
$^{\prime}$	In Pri	Donna	Piano
	ture of a member or authorized representative of a member	-	Printed or typed name of signee

Signature of Registered Agent