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(((H23000299263 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SINGLEFILE TECHNOLOGIES

Account Number : 120220000019 Phone : (800)391-9869 Fax Number : (800)391-9869

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: Ista@readyspaces.com

LLC REGISTERED AGENT CHANGE READYSPACES ORS LLC

Certificate of Status	0
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Help

K. SALY

SEY - 1 2023

To:

COVER LETTER

_	istration Section ision of Corporations				
SUBJECT:	READYSPACES ORS LLC				
.,	Name of Limited Liability Company				
Dear Sir or l	Madam:				
The enclose	d Registered Agent/Registered (Office Change a	nd fee(s) are submitted for filing.		
Please return	1 all correspondence concerning	g this matter to th	ne following:		
KEVIN PET	ROVIC				
	Name of Person				
READYSPA	CES ORS LLC				
	Firm/Company				
1919 Vinebu	rn Ave				
	Address				
Los Angeles.	CA 90032				
	City/State and Zip Cod	e			
lytia@readys	paces.com				
E-mail	address: (to be used for future	annual report not	tification)		
For further i	nformation concerning this mat	ter, please call:			
SingleFile Te	chnologies, Kanetha Bishop	800 at (391-9869		
	Name of Person	<u> </u>	Area Code & Daytime Telephone Number		
Reg Div P.O	iling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enc	losed is a check for the follow	ing amount:			
≅ \$.	25 Filing Fee	۵	\$55 Filing Fee & Certified Copy		
INHS18 (2/14	1)				

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.

ij			(1	(b)		
	Principal office address of limited liability company. (Note: MUST BE STREET ADDRESS)	ny,		(b) Mailing address of limited liability compar		
	2507 INVESTORS ROWSUITE 100			(<u>Note: MAY BE POST OFFICE BOX</u> 1919 Vineburn Ave.		
						
	ORLANDO, FL 32837			Los Angeles, CA 90032		
	11/12/2021			1.21000488978		
	Date of filing/registration in Florida	 4.		Document number		
a)						
•	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	KEVIN PETROVIC					
	Registered Office Address	*ADDRE	:53			
	Registered Office Address <u>(MUST BE FLORIDA STREET</u> 2900 NW 112TH AVE	*ADDRE	<u> </u>			
	2900 NW 112TH AVE					
	2900 NW 112TH AVE					
1)	DORAL . F	l. <u>33172</u>				
))	2900 NW 112TH AVE	l. <u>33172</u>				
))	2900 NW 112TH AVE DORAL, F Enter name of NEW Registered Agent and/or NEW Registere	l. <u>33172</u>				
))	2900 NW 112TH AVE DORAL, F Enter name of NEW Registered Agent and/or NEW Registere REGISTERED AGENTS INC	l. <u>33172</u>		5)22 5)(1)		
))	DORAL	l. <u>33172</u>				
·)	2900 NW 112TH AVE DORAL, F Enter name of NEW Registered Agent and/or NEW Registere REGISTERED AGENTS INC	l. <u>33172</u>				

was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company,

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Kevin Petrovic	Kevin Petrovic
Signature of a member or authorized representative of a member	Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

David Roberts Asst., Secretary Signature of Registered Agent