

221 000 512861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

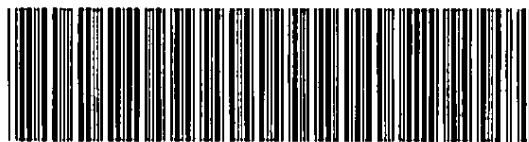
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600388558746

06/07/22--01009--006 **25.00

FILED
2022 JUN -7 PM 2:23
CASHING

Ra Change

AUG 21 2022

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Williams-Projects LLC
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:

Mark Williams

Name of Person

Williams-Projects LLC

Firm/Company

4745 Quailwood Way, Apt A

Address

Boynton Beach, FL, 33436

City/State and Zip Code

2markwill@gmail.com

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

For further information concerning this matter, please call:

Mark Williams at (561) 3345936
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:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy


2022 JUN -7 PM 2:23

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

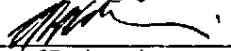
Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Williams-Projects LLC
2. (a) 4745 Quailwood Way, Apt A
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Boynton Beach,
Florida, 33436
- (b) 4745 Quailwood Way, Apt A
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Boynton Beach
Florida, 33436
3. 12/03/2021 Date of filing/registration in Florida
4. L21000512861 Document number
5. (a) ZENBUSINESS INC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
336 E. COLLEGE AVE.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
SUITE 301
TALLAHASSEE, FL 32301
- (b) MARK WILLIAMS
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
4745 Quailwood Way
NEW Registered Office Address:
Apt A
Boynton Beach, FL 33436

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) 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.

 Signature of a member or authorized representative of a member
Mark Williams 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.


Signature of Registered Agent