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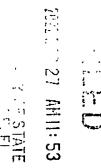
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PICK-UP	☐ WAIT	MAIL				
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COVER LETTER

Division of Corporations	
R.E.B. Properties LLC SUBJECT:	
	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matte	er to the following:
Maya Risteska	
Name of Person	
R.E.B. Properties LLC	
Firm/Company	
18311 Highwoods Preserve Pkwy Unit 1110	
Address	
Tampa, FL 33647	
City/State and Zip Code	
INFO@BEAUTYBLISSACADEMY.COM	
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, please	call:
Maya Risteska at (813 352-1433
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	nt:
■ \$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.

1. Na	ame of the limited liability company: R.E.B Properties	LLC					
2. (a)	18311 HIGHWOODS PRESERVE PKWY		(b) 18311 HIGHWOODS PRESERVE PKWY				
÷. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limi (Note: MAY BE PO			
	UNIT 1110		UNIT 1110				
	TAMPA, FL 33647		TAMPA, F	L 33647			
	12/20/2021		L2100053376	63			
3.5. (a)	Date of filing/registration in Florida ZENBUSINESS INC	4.		Document number	Г		
5. (a)	Registered Agent and Registered Office shown on the records of 336 E COLLEGE AVE	f the Florid	a Dept, of State	- ::			
	Registered Office Address (MUST BE FLORIDA STREET SUITE 301	ADDRES.	<u>S)</u>	•			
	TALLAHASSEE, F	L_32301					
(b)	MAYA RISTESKA				٠.	.>	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office ac	ldress:	-	- · · · ·	1	
	18311 HIGHWOODS PRESERVE PKWY				TS T	AM 11: 54	
	NEW Registered Office Address:					<u>2</u>	
	UNIT 1110			-			
	TAMPA, F	33647 l					
change agent v was/w the art	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ture of a member of authorized representative of a member by accept the appointment as registered agent and agains of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address. It din writing of this change.	e register iability co of the lin e limited MA	ed office and ompany, it is nited liability liability com YA RISTESK	I the business offic hereby confirmed company or as of pany. (A) Printed or typed name	ce of the that the herwise	registe chang provid	ered e(s) ed in
	d in writing of this change.		,		,	,	

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