

h22 0000001757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

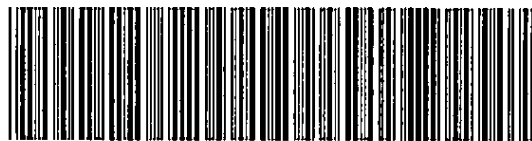
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200373163102

RECEIVED

JAN 10 2022

01/11/22--01012--007 **25.00

FILED

2022 JAN 10 AM 7:48

SECRETARY OF STATE
TALLAHASSEE, FL

JAN 07 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sonder Counseling Solutions, 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:

Loretta A. Player

Name of Person

Firm/Company

2425 S. Volusia Ave Suite B4

Address

Orange City, FL 32763

City/State and Zip Code

Loretta.Player@outlook.com

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

For further information concerning this matter, please call:

Loretta Player

386

801-9158

at ()

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

**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: Sonder Counseling Solutions, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

2425 S. Volusia Ave Suite B4

Orange City, FL 32763

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

2425 S. Volusia Ave Suite B4

Orange City, FL 32763

12/22/2021

L22000001757

3. Date of filing/registration in Florida

4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

United States Corporation Agents, INC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

5575 S. Semoran Blvd Suite 36

Orlando, FL 32822

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Betty Haas, CPA

NEW Registered Office Address:

2813 S Hiawassce Rd #307

Orlando, FL 32835

FILED
2022 JAN 10 AM 7:48
SECRETARY OF STATE
TALLAHASSEE, FL

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.

Loretta A. Player
Signature of a member or authorized representative of a member

Loretta A. Player

Printed or typed name of signer

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.

Betty Haas
Signature of Registered Agent