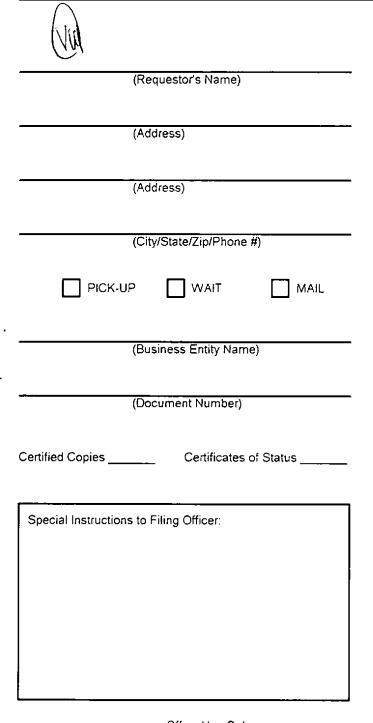
L 2 2 0 0 0 0 1 1 7 5 3

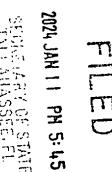


Office Use Only



500420923745

01/11/24--01035--005 **50.00



COVER LETTER

TO: Registration Section

Divi	sion of Corporations							
SUBJECT:	Smartflow Solutions LLC							
	Name of Limited Liability Company							
Dear Sir or N	Madam:							
The enclosed	l Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.						
Please return	all correspondence concerning this matter	to the following:						
Andrew Piero	e							
	Name of Person							
Cindy's Florid	ia LLC							
	Firm/Company							
8051 N. Tami	iami Trail STE E6							
	Address	 						
Sarasota, Flor	ida, 34243							
	City/State and Zip Code							
zcardona@wy	yomingllcattomey.com							
E-mail	address: (to be used for future annual report	t notification)						
For further in	nformation concerning this matter, please c	all:						
Andrew Pierc	e 30 at (07 683-0983						
	Name of Person	Area Code & Daytime Telephone Number						
Regi Divi P.O.	ling Address: istration Section sion 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						
Encl	osed is a check for the following amount	:						
≅ \$2	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.

l. Na	ame of the limited liability company: Smartflow Solu	itions LL	.C								
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Sarasota, Florida, 34243			(b) 8051 N. Tamiami Trail STE E6							
2. (u)				Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Sarasota, Florida, 34243							
	01/04/2022	.		.22000011	753						
3.	Date of filing/registration in Florida	4.			Document no	umber					
5. (a)	REGISTERED AGENT SOLUTIONS, INC										
,	Registered Agent and Registered Office shown on the records 2894 REMINGTON GREEN LANE SUITE A	of the Flo	rida	Dept. of Stat	te:						
	Registered Office Address (MUST BE FLORIDA STREE	T ADDR	ESS,		_						
	TALLAHASSEE ,,	FL_3230	8		_	- (A ≥C 	2024 J				
(b) .	Cindy's Florida LLC				_	LYNAS	2024 JAN 1 I				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office	add	ress:		Y OF	70	T			
	8051 N. Tamiami Trail STE E6				_	(취) 변경 변화	ည်၊				
	NEW Registered Office Address:					(L)	ţ.				
	Sarasota	3424; FL	3		_						
change agent v was/we	imited liability company is not organized under the less or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members coles of organization or the operating agreement of the	aws of the regist liability of the limite	tere cor limi ed li	l office an npany, it is ted liabilit	id the business is hereby conf ty company or	s office of th irmed that th	e regis le chan	tered ge(s)			
Signa	ture of a member or authorized representative of a member	_			Printed or type	ed name of sign	cc				
provisi the obl to mere	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple- igations of my position as registered agent as provid ely reflect a change in the registered office address, d in writing of this change	te perfoi led for i	rma n C	nce of my hapter 605	duties, and Le 5, F.S. Or, if t	am familiar i this documer	with an it is be:	d accept ing filed			
Signatu	re of Registered Agent										