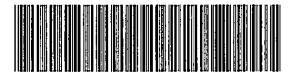
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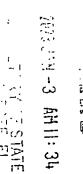
(Requestor's Name)				
(Address)				
(Address)				
(riddless)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
}				

Office Use Only



600399286706

01/08/23--01017--005 **25.00



COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: Fanny Kuhn 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 f	Collowing:					
Fanny Kuhn							
Name of Person							
Fanny Kuhn LLC							
Firm/Company		_					
5600 Collins Ave. 9V							
Address							
Miami Beach, FL, 33140							
City/State and Zip Cod	e						
fannymkuhn@gmail.com							
E-mail address: (to be used for future a	annual report notifi	cation)					
For further information concerning this matter	ter, please call:						
Fanny Kuhn	786 at (2123967					
Name of Person		Area Code & Daytime Telephone Number					
Mailing Address:		Street Address:					
Registration Section		Registration Section					
Division of Corporations		Division of Corporations					
P.O. Box 6327		The Centre of Tallahassee					
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810					
		Tallahassee, FL 32303					
Enclosed is a check for the follow	ing amount:						
■ \$25 Filing Fee	□ \$5	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.

2. (a)	5600 Collins Ave. 9V	()-	5600 Collir	ns Ave. 9V
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)			failing address of limited liability company; (Note: MAY BE POST OFFICE BOX)
	33140		33140	
	Miami Beach, FL		Miami Beac	ch, FL
	8 January 2022		L220	00014312
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Zenbusiness Inc			
5. (a)	Registered Agent and Registered Office shown on the recor	ds of the Florida	Dept, of State	:
	336 E College Ave			
	Registered Office Address (MUST BE FLORIDA STR.	EET ADDRESS	<u> </u>	
	STE 301			150 60 1
	Tallahassee	, FL 32301		
(b)	Fanny Kuhn			ن الآيا
	Enter name of NEW Registered Agent and/or NEW Regis	tered Office ad	dress:	
	5600 Collins Avenue			MHII: 34
	NEW Registered Office Address:			
	Apt 9V			
	Miami Beach	, FL_33140		
change agent v was/we the arti (Signa I here provise the object to mere)	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membicles of organization or the operating agreement of the entire of a member of all statutes relative to the proper and complications of my position as registered agent as provided in writing of this change.	f the registered liability colors of the limited l	ed office and impany, it is ited liability iability com	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. NY KUNN Printed or typed name of signee

Municipal

Signature of Registered Agent