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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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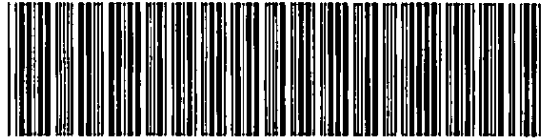
(Business Entity Name)

(Document Number)

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FEB 28 2022

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Corner Collective, 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:

Erica Alonzo
Name of Person

Corner Collective, LLC
Firm/Company

P.O. Box 354094
Address

Palm Coast, FL 32135
City/State and Zip Code

Corner Collective LLC@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erica Alonzo at (904) 315-4202
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: Corner Collective, LLC

2. (a) 23 Budshire Lane (b) P.O. Box 354094

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Palm Coast, FL 32137

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

Palm Coast, FL 32135

3. 1-7-2022 4. L22 000016467
Date of filing/registration in Florida Document number

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

225 E. Robinson Street, Suite 570

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Orlando, FL 32801

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

23 Budshire Lane

NEW Registered Office Address:

Palm Coast, FL 32137

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.

Erica Alonso

Signature of a member or authorized representative of a member

Erica Alonso

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.

Erica Alonso

Signature of Registered Agent

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