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## **COVER LETTER**

INHS18 (2/14)

то:	Registration Section Division of Corporations						
CHANGE OF REGISTERED AGENT FOR LAUREN D. KERR, PLLC SUBJECT:							
	Name of Limited Liability Company						
Dear Si	ir or Madam:						
The end	closed Registered Agent/Registered	d Office Change an	nd fee(s) are submitted for filing.				
Please	return all correspondence concerni	ng this matter to the	e following:				
LAURE	EN KERR						
	Name of Person	<del></del>	<del></del>				
LAURE	EN D. KERR, PLLC						
	Firm/Company						
433 CEI	NTRAL AVENUE, 4TH FLOOR						
	Address		<del></del>				
ST. PET	TERSBURG, FLORIDA 33701						
	City/State and Zip Co	ode	<del></del>				
LAURE	N@LKERRLAW.COM						
E-	mail address: (to be used for future	annual report noti	fication)				
For furt	her information concerning this ma	atter, please call:					
LAURE	N KERR	352 at (	816-1576				
	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 follow	ving 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. N	ame of the limited liability company: LAUREN D. K	ERR		
2. (a)	433 CENTRAL AVENUE, 4TH FLOOR	_	SAME /	AS (a)
- (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	ST. PETERSBURG, FLORIDA 33701	······································		
	18 JAN 2022		L2200002	9777
<ul><li>3.</li><li>5. (a)</li></ul>	Date of filing/registration in Florida LAUREN KERR	4.		Document number
(b) <u>.</u>	Registered Agent and Registered Office shown on the records of 433 CENTRAL AVE, 4TH FLOOR	of the Flori	da Dept. of St	ate:
	Registered Office Address (MUST BE FLORIDA STREE	TADDRES	<u>(S)</u>	2022 FE SECRI
	ST. PETERSBURG	FL_33701		FIL 2022 FEB 14 SECRETAR TALLASH
	REGISTERED AGENTS INC.			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office a	ddress:	AM IO: 53
	NEW Registered Office Address:		<u> </u>	_
	7901 4th St N, STE 300			_
	St. Petersburg	FL_33702		
change agent was/we the arti	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited learn authorized by an affirmative vote of the members cles of organization or the operating agreement of the ture of a member or authorized representative of a member obvious of all statutes relative to the proper and complete transfer of the proper and complete transfer or the proper and com	ne register liability of the lir e limited LA	red office a company, it nited liabil liability co UREN D. K	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.  ERR  Printed or typed name of signee
to mer	igations of my position as registered agent as provide by reflect a change in the registered office address. I I in writing of this change.	PATATOR IN (	namer ou	(1 + 1) + (1 +
Signatu	re of Registered Agent			

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