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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Email Address:

LLC REGISTERED AGENT CHANGE **OUTCAST ENTERPRISE, LLC**

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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. Ni	ame of the limited liability company: OutcastEnterprise.	LLC	
2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	01/24/2022	L220000	
3.	Date of filing/registration in Florida	4.	Document number
i. (a)			
	Registered Agent and Registered Office shown on the records of the 2265 BANCROFT CIRCLE S	he Florida Dept. of .	State:
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	
	APT E		
	PALM HARBOR , FL	34683	7. 7.3 C3
(b)	Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered (7901 4th St N NEW Registered Office Address STE 300		-5 PH 3: 01
	St. Petersburg . FL	33702	
he cha gent v vas/wa he arti	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the registered of bility company, f the limited liab	ffice and the business office of the registered it is hereby confirmed that the change(s) willty company or as otherwise provided in
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
Llove	by accept the appointment as registered agent and agra	ee to act in this operformance of i	cupacity. I further agree to comply with the my duties, and I am familiar with and accep
provisa he obl o mero votifica	ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	l for in Chapter ereby confirm th	605, F.S. Or, if this document is being filed hat the limited liability company has been