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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
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COVER LETTER

TO:	Registration Section Division of Corporations,		,
	Morgan Sun, LLC		•
SUBJ	ECT:		
	1	Name of Limited	Liability Company
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered	Office Change a	nd fee(s) are submitted for filing.
Please	e return all correspondence concerning	g this matter to th	ne following:
Karer	Butz Webb		
	Name of Person	· · · · · · · · · · · · · · · · · · ·	
Morg	an Legacy Partners, Inc.		
	Firm/Company		
c/o 91	0 Sagamore Avenue		
	Address		
Portsi	mouth, NH 03801		
	City/State and Zip Coo	de	
karen	@morganlegacypartners.com		
_	E-mail address: (to be used for future	annual report no	tification)
For fi	urther information concerning this ma	tter, please call;	
Karei	ı Butz Webb	603	475-1135
		at (
	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	ving amount:	
	■ \$25 Filing Fee	٥	\$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.

X 1	Morgan Sun, LLC				
	me of the limited liability company: 2520 Tamiami Trail N, Suite 18			ami Trail N, Suite 18	
(a) ₋	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Nokomis, FL 34275		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Nokomis, FL 34275		
	February 3, 2022	- 1	,220000587	(4)	
(n)	Date of filing/registration in Florida Matthew D. Schuler	4.		Document number	
(a)	Registered Agent and Registered Office shown on the records of the Matthew D. Schuler	ne Florida	Dept. of State	:	
	Registered Office Address (MUST BE FLORIDA STREET A 1380 45th Street	DDRESS)		2022 SEC	
	Sarasota, FL_	34234		FIL 2022 FEB 22 SECAL TAKE TALL AHA	
(b)	Christina Florand			NASSE HASSE	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : Christina Florand			FEB 22 PH 2: 44 CHE TAKY OF STATE ALL AHASSEE, FL	
	NEW Registered Office Address: 4949 Harris Avenue			-	
	Sarasota F1.	34233		_	
hange gent v ras/we ne arti	imited liability company is not organized under the law e or changes are made, the Florida street address of the 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	registere bility co f the lim limited li	mpany, it is ited liability iability con	s hereby confirmed that the change(s) y company or as otherwise provided in ipany. Member, Duly Authorized	
here rovis he obi mer otifie	nure of a member or authorized representative of a member by accept the appointment as registered agent and agre 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. The of Registered Agent				