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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 : (813)436-5206

Epperthe email address for this business entity to be used for future

Sampual report mailings. Enter only one email address please.** Email Address:

LLC REGISTERED AGENT CHANGE BONE AND BONE INVESTMENT LLC

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M. SOLOMON MAR 2 5 2024

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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.

2. (a)		(b)				
i. (a)	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)			
	02/07/2022		2000064062			
5.	Date of filing/registration in Florida	4.	Document m	unber		
. (a	UNITED STATES CORPORATION AGENTS, INC.					
	Registered Agent and Registered Office shown on the records					
	476 RIVERSIDE AVE.					
	Registered Office Address (MUST BE FLORIDA STREE	<u>:T ADDRESS)</u>			ZiiZ	
					2024 MAR	
	AN OVER CANALL F	ici aaana				
	JACKSONVILLE	11. 32202		.;	Ω M	Ī
(b)	Registered Agents Inc			<u>`</u> -	P	ŢĪ
	Enter name of NEW Registered Agent and/or NEW Register	red Office addre	555	,	.;.	C
				71.1 2.5.		
	7901 4th St N					
	NEW Registered Office Address:					
	STE 300					
	St. Petersburg .	FL 33702				
ic ch gent cas/w	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member icles of organization or the operating agreement of t	of the registe Hiability com rs of the limite	red office and the busing pany, it is hereby confi d liability company or	ness office of th irmed that the c	ic regist hange(s	ered
	ature of a member or authorized representative of a member	Robin	Jones			
•	•		Printed or type	d name of signee		
l here rovis he ob o nigi	thy accept the appointment as registered agent and e tions of all statutes relative to the proper and comple ligations of my position as registered agent as provi why reflect a change in the registered office address, ad in writing of this change.	agree to act in ale performan ided for in Ch . I hereby con,	this capacity. I furthe ce of my duties, and I o upter 605, F.S. Or, if t firm that the limited lia	r agree to com un familiar wid his document is ibility company	oly with rand ac rbeing) has bec	the scept filed n

- Assistant Secretary

David Roberts

)2010 | Spetts ignature of Registered Agent