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(((H24000052065 3)))



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To:

Division of Corporations

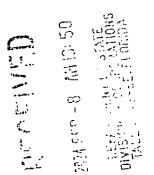
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From:

Account Name : INCFILE.COM LLC Account Number : I20220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

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LLC REGISTERED AGENT CHANGE LADY RAY'S CULINARY DELIGHTS LLC

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K. Brumbley

C	OVER LETTER (((H24000052d65 3)))	
TO: Registration Section Division of Corporations	(((/.12100002000 0)))	
LADY RAY'S CULINARY DELIGHTS L SUBJECT:	LC	
	.imited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Ch	range and fee(s) are submitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
LOVETTE DOBSON		
Name of Person		
Firm/Company		
17350 STATE HWY 249 STE 220		
Address		
HOUSTON, TX 77064		
City/State and Zip Code		
EFILE1234@INCFILE.COM		
E-mail address: (to be used for future annual re-	port notification)	
For further information concerning this matter, please	e call:	
LOVETTE DOBSON at (888-462-3453	
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, F1, 32303	
Enclosed is a check for the following amou	int:	
■ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	
INTERESTAL IN	(((H24000052065 3)))	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY (((H24000052065 3)))

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,

I, N	ame of the limited liability company:	U.INARY DELIGHTS ELC
2. (a)	112 SOUTHHAVEN CIRCLE	(b) 112 SOUTHHAVEN CIRCLE
	Principal office address of limited liability company. (Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability company. (Note: MAY BE POST OFFICE BON)
	SANTA ROSA BEACH, FL 32459	SANTA ROSA BEACH, FL 32459
	02/22/2022	1.2200H085226
3. 5. (a)	Date of filing/registration in Florida REPUBLIC REGISTERED AGENT LLC	
	Registered Agent and Registered Office shown on the records of 1150 NW 72ND AVE TOWER I	the Florida Dept of State:
	Registered Office Address	
	MIAMI . I'I	2024 FEB
(h)	Tim Vondell	
	Enter name of <u>NEW Registered Agent</u> und/or <u>NEW Registered</u>	1 Office address:
	833 Harbor Blvd Unit 19	
	NEW Registered Office Address:	သ လ
	Destin	32541
chang agent was/w the art	limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited by	ws of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in limited liability company. Timothy Vondell Printed or typed name of signee
		·
provis the ob to met	ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d'in writing of this change,	vee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept of for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been
	Tim Vendell Tre of Registered Ageja	

FILING FEE: \$25.00