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Office Use Only

COVER LETTER

Division of Corporations AIC Companies LLC SUBJECT: Name of Limited Liability Company Please return all correspondence concerning this matter to the following: Michael Serrano Name of Person ZenBusiness Inc. Firm/Company 336 E. College Ave. Suite 301 Address Tallahassee, FL 32301 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michael Serrano 844 493-6249 at (Area Code & Davtime Telephone Number Name of Person 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 following amount:

\$55 Filing Fee & Certified Copy

S25 Filing Fee

ra@zenbusiness.com

Registration Section TO:

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

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.

Na	ame of the limited liability company:	5 LLC		
(a)	1081 AZUL CT	(b) PO BOX	831
. /	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	· <u> </u>	-,	Mailing address of limited liability company (Note: MAY BE POST OFFICE BON)
	POMPANO BEACH, FL 33064		MEDFO	RD, NJ 08055
	02/23/2022		L22000096	5354
(a)	Date of filing/registration in Florida REGISTERED AGENTS INC	4.		Document number
	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat 7901 4TH ST N			ne:
	Registered Office Address (MUST BE FLORIDA STREE STE 300	T ADDRES	<u>(S)</u>	_
	STE 300	<u>т ADDRES</u> -1	<u>3)</u>	- 1 - 1 - 1
(b)	STE 300		<u></u>	
(b)	STE 300 St. Petersburgh I	卍_ <u>33702</u>		2022 CFC 12 PH
(b)	STE 300 St. Petersburgh ZenBusiness Inc	卍_ <u>33702</u>		MED VOEST
(b)	STE 300 St. Petersburgh, H ZenBusiness Inc Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	卍_ <u>33702</u>		
(b)	STE 300 St. Petersburgh, H ZenBusiness Inc Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> 336 E. College Ave.	卍_ <u>33702</u>		2022 DEC 12 PH 3: 20

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

ie /s/ Matthew Anderson

Matthew Anderson

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

that Mensile Khadijeh Hemmati 11-30-2022

Signature of Registered Agent

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