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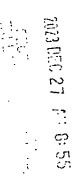
(Requestor's Name)					
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PICK-UP WAIT MAIL					
(During F. Viv. 11					
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COVER LETTER

TO:	Registration Section Division of Corporations					
	FL VENTURES 2022, LLC					
SUBJE	CCT: [*] ,					
	•	Name of Limited Liability Company				
Dear Si	r or Madam:					
The end	closed Registered Agent/Registered	Office Change	and fee(s) are submitted for filing.			
Please	return all correspondence concernin	g this matter to	the following:			
TATIAN	NA GRANT.					
	Name of Person					
	Firm/Company					
4331 PI	NE MEADÓW LANE					
	Address					
SARAS	OTA, FL 34233					
	City/State and Zip Coo	de				
MATT@	BIZXCONSULTING COM					
E	-mail address: (to be used for future	annual report n	notification)			
For fur	ther information concerning this ma	tter, please call:	:			
TATIAN	NA GRANT	970	305-0720			
		at ()			
	Name of Person		Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section		Street Address: 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		☐ \$55 Filing Fee & Certified Copy			
INHS18	-		· · ·			

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.

	FL VENTURES, I		
	ame of the limited liability company:		8738 LONGS PEAK CIRCLE
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) WINDSOR, CO 80550		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) WINDSOR, CO 80550
	03/23/2022	 1 	.22000119655
3, 5. (a)	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.	Document number
). (a)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State:
	Registered Office Address 1201 HAYES STREET	1DDRESS	
	TALLAHASSEE, FL	34301	
(b)	TATIANA GRANT		000 2
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	ress:
	NEW Registered Office Address: 4331 PINE MEADOW LANE		J. J.
	SARASOTA, FL	34233	
change igent v was/we he 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	registere bility con f the lim limited li	d office and the business office of the registered inpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi The obi To mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. It is a writing of this change.	ee to act performa I for in C sereby co	in this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been