## Laa000125525

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer;				
J. HORNE APR 27 2024				

Office Use Only



900427723519

04/16/24--01017--003 \*\*25.00



## COVER LETTER

Division of Corporations	
SPARKS FLY, ELC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Katelynn Torres	
Name of Person	
Kelleher + Holland, LLC	
Firm/Company	<del></del>
1100 5th Avenue South	
Address	<del></del>
Naples, FL 34102	
City/State and Zip Code	
ckregel@kelleherholland.com	
E-mail address: (to be used for future annual r	report notification)
For further information concerning this matter, plea	ise call:
Katelynn Torres	847 713-1349
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, FL 32303
Enclosed is a check for the following amo	ount:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

4 - . -

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.

. (a)	468 3RD AVENUE N	(	b) 468 3RI	O AVENUE N
. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	· · · · · · · · · · · · · · · · · · ·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	NAPLES, FL 34102		NAPLE	S, FL 34102
	3/28/2022	_	L220001:	25525
. (a)	Date of filing/registration in Florida  Darren Mills	4.		Document number
. (a)	Registered Agent and Registered Office shown on the records of	the Floric	la Dept. of Si	tate:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>si</u>	_
	1100 5th Avenue South Suite 410			
	Naples , FI	34102		<del></del>
(b)	Andrew J. Kelleher Jr.			<del></del>
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registerer</u>	Office a	ldress:	7024
				PR FI
	NEW Registered Office Address:			
	1100 5th Avenue South Suite 410			
	Naples, FI	34102		2024 APR 16 PM 12: 21
f the li	imited liability company is not organized under the later or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li-	ws of the register	State of Fed office a	Florida, it is hereby confirmed that after the und the business office of the registered is hereby confirmed that the change(s)
gent v vas/we he arti	ere authorized by an affirmative vote of the members of the of the of the operating agreement of the	limited	liability co	ompany.
gent v vas/we he arti	ere authorized by an affirmative vote of the members of	limited	liability co	ompany.