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(Re	equestor's Name)	_	
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TALLAHASSEE, FL

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COVER LETTER

Registration Section Division of Corporations

\$18 (2/14)

CEGE ENTERPRISES LLC

JECT:		
Name of	Limited Liability Company	
Sir or Madam:		
inclosed Registered Agent/Registered Office Cl	hange and fee(s) are submitted for filing.	
e return all correspondence concerning this mat	tter to the following:	
ISTOPHER EVANS		
Name of Person		
E ENTERPRISES LLC		
Firm/Company		
NW 57FH WAY		
Address		
KLAND, FL 33067		
City/State and Zip Code		
IS@CEGEENTERPRISES.COM		
E-mail address: (to be used for future annual re	port notification)	
urther information concerning this matter, pleas	se call:	
ISTOPHER EVANS	954 204-8895	
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	unt:	
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

TEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

ant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company ts the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

ame of the limited liability company: CEGE ENTERI	PRISES LLC	
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 7957 N UNIVERSITY DRIVE #1030	(b)	
PARKLAND, FL 33067	PARKLAND, FL 33067	
10/09/2023	1.22000158972	
Date of filing/registration in Florida	4. Document number	
Registered Agent and Registered Office shown on the records of CHRISTOPHER W EVANS Registered Office Address (MUST BE FLORIDA STREET) 6401 NW 57TH WAY		
PARKLAND	SECRETARY OF TALL AHASSET	
Enter name of NEW Registered Agent and/or NEW Registered REGISTERED AGENTS INC	ASSEE, FL	
NEW Registered Office Address: 7901 4TH STREET N STE 300	m t r	
ST. PETERSBURG F	33701	
e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited I	aws of the State of Florida, it is hereby confirmed that after the ne registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) sof the limited liability company or as otherwise provided in a limited liability company.	
Kristopher Evans	CHRISTOPHER W EVANS	
nture of a member or authorized representative of a member	Printed or typed name of signee	
by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d'in writing of this change.	gree to act in this capacity. I further agree to comply with the e performance of my duties, and I am familiar with and accept led for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been	
ed Roberts		
ire of Registered Agent		