

L22000183870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

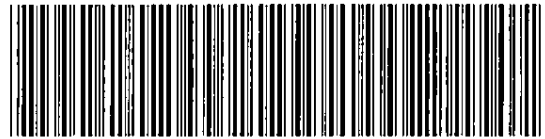
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/30/24--01014--022 **100.00

01/03/25--01001--001 **100.00

FILED
2024 DEC -6 AM 8:55
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 19, 2024

ROLANO LOPEZ
1713 S. LOIS AVENUE
SUITE 200
TAMPA, FL 33629

SUBJECT: EXCITE SWAG COMPANY, LLC
Ref. Number: L22000183870

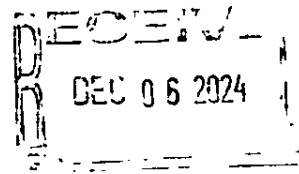
We have received your document for EXCITE SWAG COMPANY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is an additional filing fee of \$100.00. The LLC has to be reinstated. The LLC was dissolved for Registered Agent.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 624A00025270



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.

1. Name of the limited liability company: EXCITE SWAG COMPANY, LLC

2. (a) 8605 PALM RIVER ROAD (b) 8605 PALM RIVER ROAD

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

TAMPA, FL 33619

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

TAMPA, FL 33619

05/04/2022

1.22000183870

3. Date of filing/registration in Florida

4. Document number

5. (a) NONE

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

FL

(b) Rolando Lopez

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

1713 S Lois Ave, Ste 200

NEW Registered Office Address:

Tampa, FL 33629

FILED
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TALLAHASSEE, FLORIDA

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.

Signature of a member or authorized representative of a member

Saleem Musallam
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.

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00