Florich Department of State
Bivision of Corporations

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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206 FILED
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LLC REGISTERED AGENT CHANGE ECCO SUPPLY LLC

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Corporate Filing Menu

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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.

L Na	ame of the limited liability company:			
2. (a)		(b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	•	Mailing address of limited liability company: (Note: M-(YBE POST OFFICE BOX))	
	2871 Clayton Crossing Wy Ste 1017 #2017	:	2871 Clayton Crossing Wy Ste 1017 #2017	
	Oviedo FL 32765	(Oviedo FL 32765	
	04/27/22	L2	22000189760	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	CODY J GUIRRERI			
J. (11)	Registered Agent and Registered Office shown on the records of	of the Florida D	ept of State	
	2042 GLORIA OAK CT			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
			ACC TO THE TOTAL T	
	ORLANDO . F	L. 32820		
	. I'	l	PICE PH 4: 09 SECRETARISTE F. FLORID	
(b)	Registered Agents Inc			
	Enter name of NEW Registered Agent and/or NEW Registere	SSFF. FLORI		
	7901 4th St N			
	NEW Registered Office Address:			
	STE 300			
	St. Petersburg	33702 L		
the cha agent v was/we the arti / Signat	mited liability company is not organized under the lange or changes are made, the Florida street address of still be identical. Or, in the ease of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the ure of a member or authorized representative of a member by accept the appointment as registered agent and accounted igations of my position as registered agent as providing the reflect a change in the registered office address.	of the registe liability com of the limite e limited lia Robin :	red office and the business office of the registered pany, it is hereby confirmed that the change(s) red liability company or as otherwise provided in bility company. Dones Printed or typed name of signee Printed or typed name or	
	f in writing of this change.	_		