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COVER LETTER

TO: Registration Section Division of Corporations					
Mobile Tint Genie SUBJECT:					
	Name of Limited	Liability Company			
Dear Sir or Madam:					
The enclosed Registered Agent/Register	red Office Change an	d fee(s) are submitted for filing.			
Please return all correspondence concer	rning this matter to the	e following:			
Eric Gamble					
Name of Perso	n				
Mobile Tint Genie					
Firm/Company	· · · · · · · · · · · · · · · · · · ·				
1615 58th Terrace South Bldg 5 Unit 3				2022	
Address	· · · · · · · · ·) 3 2 71	2022 HAY 10	
St. Petersburg, FL 33712			- 25年 - 15年	0	(
City/State and Zip	Code		 	AH 10a	
blue_hundreds@yahoo.com				ស រួ	
E-mail address: (to be used for fu	ture annual report not	ification)			
For further information concerning this	matter, please call:				
Eric Gamble	727 at (401-5376			
Name of Person		Area Code & Daytime Telephone Nur	nber		
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 fo	llowing amount:				
■ \$25 Filing Fce		\$55 Filing Fee & Certified Copy			

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.

. Na	me of the limited liability company: Mobile Tint Genie			
?. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	-	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		<u> </u>		
	April 21, 2022	_	1244358	
	Date of filing/registration in Florida	4.		Document number
. (a)	Legal Zoom			
. (a)	Registered Agent and Registered Office shown on the records of t	he Flori	da Dept. of St	ate:
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE.	<u>SS)</u>	
				T I NO
	, FL			-
(b)				A TO A
(0)	Enter name of NEW Registered Agent and/or NEW Registered			AH 10: 5:
	Eric Gamble			, %
	NEW Registered Office Address:			
	1615 58th Terrace South Bldg 5 Unit 3		·	
	St. Petersburg	33712		
nange gent v vas/we ne arti	imited liability company is not organized under the law 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 cles of organization or the operating agreement of the law.	registe bility of the li limited	ered office a company, it mited liabil	is hereby confirmed that the change(s) ity company or as otherwise provided in
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
rovisi he obl) mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address. I have the property of this change	e to ac perform for in ereby	ct in this cap nance of my Chapter 60 confirm tha	pacity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been
gnatu	re of Registered Agent			