

L22000206048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

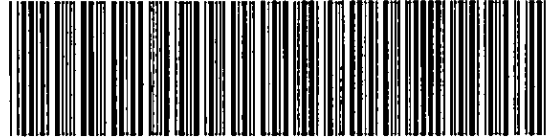
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

Law Firm of Cheryl A. Ward, P.L.

SUBJECT: _____
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cheryl A. Ward

Name of Person

Law Firm of Cheryl A. Ward, P.L.

Firm/Company

1350 Lago Mar Drive

Address

Melbourne, Florida 32940

City/State and Zip Code

cheryl@cawlawoffice.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheryl A. Ward 321 372-8177

_____ at (_____) _____
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 amount:

☒ \$25 Filing Fee

☐ \$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.

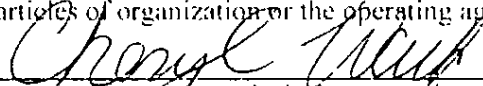
Law Firm of Cheryl A. Ward, PLLC

1. Name of the limited liability company: _____ 1350 Lago Mar Drive	
2. (a) _____ Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> Melbourne, Florida 32940	(b) _____ Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> Melbourne, Florida 32940
05/02/2022	
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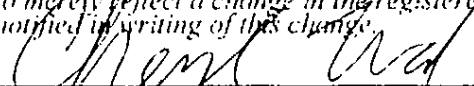
3. _____ Date of filing/registration in Florida Cheryl A. Ward	4. _____ Document number
5. (a) _____ Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 7645 Candlewick Drive Registered Office Address <i>(MUST BE FLORIDA STREET ADDRESS)</i> Melbourne 32940 FL Cheryl A. Ward	
(b) _____ Enter name of <u>NEW Registered Agent</u> and/or: <u>NEW Registered Office address</u> : 1350 Lago Mar Drive <u>NEW Registered Office Address</u> : Melbourne 32940 FL	

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2022 MAY 27 PM 12:19
TALLAHASSEE, FL

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	12/16/22 _____ Printed or typed name of signer
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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