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Ta:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_

## LLC REGISTERED AGENT CHANGE **OMNIAPIS LLC**

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T. LEMIEUX APR - 7 2023

## COVER LETTER

TO: Registration Section Division of Corporations		€
OMNIAPIS LLC		
	e of Limited Li	ability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.
Please return all correspondence concerning thi	s matter to the f	following:
Cheyenne Moseley		
Name of Person		_
Legalzoom.com, Inc.		
Firm/Company		_
101 N. Brand Blvd., 11th Floor		
Address		_
Glendale, CA 91203		
City/State and Zip Code		_
promjcs@gmail.com		
E-mail address: (to be used for future annu	ual report notifi	cation)
For further information concerning this matter,	please call:	
Cheyenne Moseley	800	773-0888 ext 9724
Name of Person		Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following	amount:	
□ \$25 Filing Fee	<b>2</b> \$5	5 Filing Fee & Certified Copy
INHS18 (2/14)		

## 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.

(a) 5	ne of the limited liability company:		
	or carmon and and a	ſ	b) 540 Carillon Parkway #3043
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BQX)
-	St. Petersburg, FL 33716		St. Petersburg, FL 33716
_			
(	03/02/2023		L22000211834
_	Date of filing/registration in Florida	— 4.	Document number
(a) _	Matthew Jerome		
	Registered Agent and Registered Office shown on the records of	f the Florid	Ja Dept. of State:
• !	540 Carillon Parkway #3043	٠.	
i	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u> </u>
.i :-			
_	Saint Petersburg (2004) The State of the Petersburg (2004) The Pet		
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(b) _	UNITED STATES CORPORATION AGENT	SINC	And the state of the second of
i. F	Enter name of NEW Registered Agent and/or NEW Registered	d Office ac	ddress:
٠ ٠.			
	5575 S. Semoran Blvd., Suite 36	·	202
]	NEW Registered Office Address:		7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7
			3
	;		-6
	Orlando	32822	2

Signature of Registered Agent