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COVER LETTER

TO: Registration Section Division of Corporations					
Division of Corporations SUBJECT: EMY INDUSTRI Name of Limited Lia	ES LLC ability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Change and f	ce(s) are submitted for filing.				
Please return all correspondence concerning this matter to the fo	ollowing:				
Estephan jazgi Name of Person	_				
EMY Industries LLC	_				
Firm/Company					
1109 MoloKai Rd	_				
Address					
Jacksonville, FL, 32216 City/State and Zip Code	_				
Estephan. Yazgi Egnail. com	-				
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Estephan Yazgi ar 904	910-4952				
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 氧 \$5	5 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.

1. Na	me of the limited liability company: EMY I	ndustries	LLC	
	1109 MoloKai Rd	POIL (d)	MoloKai	Rd
2. (a) <u>.</u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Adding address of limited (Note: MAY BE POST	OFFICE BOX)
	Jacksonville, FL, 32216	- Jack	(son ville, F	1,32216
	June 6, 2022	L22	000256	629
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Cheyenne Moseley,	JS. CORP. Ag	ents	
` '	Registered Agent and Registered Office shown on the records of t	he Florida Dept. of State	:	
	United States Corporation Age	nts INC		
	Registered Office Address (MUST BE FLORIDA STREET A		: *	Ç.
	5575 S. Semorah BLVI	D suite 36		<u> </u>
	ORLANDO FL	37875		HAY 3
(b)	Estephan Yazqi			
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	:	ç. <u> </u>
	1109 MoloKai Rd		1 <u>1</u> 1 · :	•
	NEW Registered Office Address:		•	
	Jackson ville .FL	322/6		
change agent w was/we	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered office and bility company, it is I the limited liability	I the business office of hereby confirmed the company or as other	of the registered at the change(s)
Signat	ure of a member or authorized representative of a member	<u> </u>	44 Yuzai Printed or typed name o	f signee
I herel provisi the obl to mere	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pigations of my position as registered agent as provided the reflect a change in the registered office address. I have the registered office address and this change	ee to act in this capa performance of my a l for in Chapter 605, pereby confirm that t	icity. I further agree luties, and I am fami , F.S. Or, if this doci he limited liability ca	to comply with the liar with and accept ament is being filed ompany has been