

L22000276614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

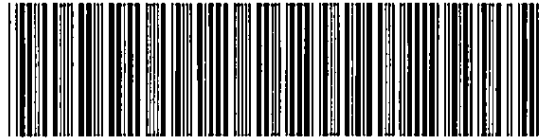
(Business Entity Name)

(Document Number)

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OFFICE OF CORPORATIONS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACE AUTOMATION GROUP LLC
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:

NICOLE M. REID
Name of Person

REID LEGAL SOLUTIONS, P.A.
Firm/Company

120 E 4TH AVE SUITE B-2
Address

MT DORA, FL 32757
City/State and Zip Code

NICOLE@REIDLEGALSOLUTIONS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICOLE M. REID at (321) 234-2478
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

22 SEP 19 PM 2:46

REGISTRATION SECTION
DIVISION OF CORPORATIONS

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. Name of the limited liability company: ACE AUTOMATION GROUP LLC

2 (a) <u>Principal office address of limited liability company:</u> (Note: MUST BE STREET ADDRESS) <u>4120 CORLEY ISLAND RD UNIT 500</u> <u>LEESBURG FL 34748-8297</u>	(b) <u>Mailing address of limited liability company:</u> (Note: MAY BE POST OFFICE BOX) <u>4120 CORLEY ISLAND RD UNIT 500</u> <u>LEESBURG FL 34748-8297</u>
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3. <u>06/17/2022</u> Date of filing/registration in Florida	4. <u>L22000276614</u> Document number
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5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
COLON, CARLOS E
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
3341 TRULUCK PLACE
OXFORD, FL 34484

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
REID LEGAL SOLUTIONS, P.A.
NEW Registered Office Address:
120 E 4TH AVE SUITE B-2
MT DORA, FL 32757

22 SEP 19 PM 2:46
 DIVISION OF CORPORATIONS

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]
 Signature of a member or authorized representative of a member

Carlos E. Colon
 Printed or typed name of signee

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]
 Signature of Registered Agent

ACE AUTOMATION GROUP LLC

Acceptance of Appointment as Registered Agent

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.

Dated: August 25, 2022

Signed.



Nicole M. Reid

Reid Legal Solutions, P.A.

22 SEP 19 PM 2:46

STATE OF FLORIDA
DEPARTMENT OF REVENUE