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Division of Corporations



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From:

Account Name	:	REGISTERED AGENTS	INC.
Account Number	:	120090000081	
Phone	:	(307)200-2803	
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T. LEMIEUX

## 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)	Principal office address of limited liability company	(b	)	
	Principal office address of limited liability company ( <u>Note: MUST BE STREET ADDRESS</u> )	: 		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	06/20/2022			908
	Date of filing/registration in Florida	4.		Document number
(a)	TOLEDO, Julio			
· · ·				
	Registered Agent and Registered Office shown on the recor 10582 LAKEHILL DR.	ds of the Florida		
			i Dept. of Sta	
	10582 LAKEHILL DR.	<u>EET ADDRESS</u>	i Dept. of Sta	
(b <sup>`</sup> )	10582 LAKEHILL DR.  Registered Office Address (MUST BE FLORIDA STR.  CLERMONT  Registered Agents Inc	<u>EET ADDRESS</u>	i Dept. of Sta	
(b)	10582 LAKEHILL DR. Registered Office Address ( <u>MUST BE FLORIDA STR.</u> CLERMONT	EET ADDRESS	a Dept. of Sta	- 2023 - 5
(b)	10582 LAKEHILL DR. Registered Office Address (MUST BE FLORIDA STRA CLERMONT Registered Agents Inc	EET ADDRESS	a Dept. of Sta	- 2023 - 5
(b)	10582 LAKEHILL DR.         Registered Office Address       (MUST BE FLORIDA STR)         CLERMONT         Registered Agents Inc         Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	EET ADDRESS	a Dept. of Sta	
(b)	10582 LAKEHILL DR.         Registered Office Address       (MUST BE FLORIDA STR)         CLERMONT         Registered Agents Inc         Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> 7901 4th St N	EET ADDRESS	a Dept. of Sta	2029 · · · 5 FH 2: 2

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.

Robin Jones Signature of a member or authorized representative of a member 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.

David Koverts David Roberts - Assistant Secretary

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00