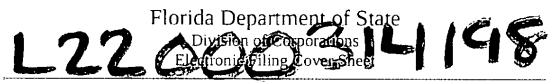
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future ∰ammual report mailings. Enter only one email address please.

குள்வ்பி Address:_

LLC REGISTERED AGENT CHANGE ANGELOS BOUNCE HOUSE RENTALS, LLC

Certificate of Status	0
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JUL 1 1 2023

From: Registered Agents Inc

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

To: 18506176383

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. 8	Name of the limited liability company: ANGELOS BOUN	CE HOUSE RENT	TALS, LLC
2. (a))	(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	07/14/22		314198
3.	Date of filing/registration in Florida	4.	Document number
	INC ALITHODITY DA	•	
5. (a	Registered Agent and Registered Office shown on the records of	the Florida Dept. of	State:
	390 NORTH ORANGE AVE., STE 2300-N		
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)	
	ORLANDO, FL	32801	
(b)	Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered	Office address:	2023
	7901 4th St N	COMME BOUT (33).	APPI A FIL 2023 JUL 1 I SECRETAR SECRET
	NEW Registered Office Address:		
	STE 300		- STS SO
	St. Petersburg , FL	33702	
the chagent was/w the ar	limited liability company is not organized under the law lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the registered of ability company, if the limited liab	ffice and the business office of the registered it is hereby confirmed that the change(s) bility company or as otherwise provided in
	Ruda us Jackay ature of a member or authorized representative of a member	Robin Jones	
			Printed or typed name of signee
provis the ob to mei natitie	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address, I lead in writing of this change.	ce to act in this of performance of if for in Chapter nereby confirm the	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been
""() "	David Roberts - Assistant Se	cretary	