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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010

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

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## LLC REGISTERED AGENT CHANGE LAUREN ELIZABETH PLLC

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Helpt. LEMIEUX

JUN 2 1 2023

## 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: <u>LAUREN ELI</u>	ZABET	TH P	PLLC	
2. 1	(a)		(t	o)		
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
3.		O7/19/2022  Date of filing/registration in Florida	- 4.	_L22	22000320494 Document number	
.).		Date of Hingregistration in Florida	4.		Document number	
5.	(a)	ZENBUSINESS INC.				
		Registered Agent and Registered Office shown on the records of t	the Florida	i Dept. i	ot. of State:	
	336 E. COLLEGE AVE.					
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			**: ca	
		SUITE 301				
		TALLAHASSEE , FL	32301		٠	
		, , ,			2023 July 20 PH	
(	(b)	Registered Agents Inc				
		Enter name of NEW Registered Agent and/or NEW Registered	Registered Office address:		<u> </u>	
					1 2: 2: 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
		7901 4th St N				
		NEW Registered Office Address:				
		STE 300				
		Ct. Batarahura	0070	•		
		St. Petersburg , FL	33702	<u>-</u>		
the age: was the	cha nt w :/we arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liage authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reginability or fithe limited l	stered impan ited li iabilit	ed office and the business office of the register any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in the lity company.	erec
/ ∖ Si	سرار gnai	ure of a member or authorized representative of a member	Rol	oin Jo	Jones Printed or typed name of signee	
I he protection	eret visio obli nere ified	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have this change.	ee to act perform I for in ( nereby co	in thi ance o Chapte onfirm	this capacity. I further garee to comply with .	the cep led 1
		David Roberts - Assistant Secretar	у			