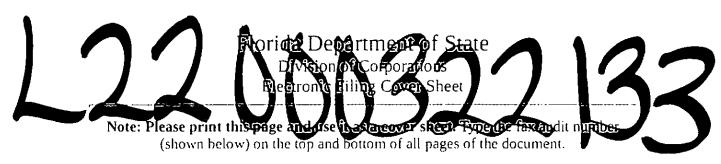
Fax: 8134365206



(((H24000374730 3)))



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

To: 18506176383

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (813)436-5206

**Ent	er	the	email	address	for	this	business	entity	to	be	used	for	future
ω,	an	nual	report	: mailin	gs.	Enter	only one	e email	add	res	s ple	ase.	**

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LLC REGISTERED AGENT CHANGE CECELIA BRANDS LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

M. SOLOMON

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)		(h)						
. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	7901 4th St N STE 300	7	7901 4th St N STE 300					
	St. Petersburg, FL 33702		St. Petersburg, FL 33702					
	07/20/22	L2	2000322133					
	Date of filing/registration in Florida	4.	Document number					
(a)	ZENBUSINESS INC.							
(a)	Registered Agent and Registered Office shown on the records of	ept. of State:						
(b)	336 E. COLLEGE AVE.							
	Registered Office Address (MUST BE FLORIDA STREET							
	SUITE 301	2024 NOV						
	TALLAHASSEE	L_32301						
	Registered Agents Inc							
	Enter name of NEW Registered Agent and/or NEW Registered							
	7901 4th St N	O7						
	NEW Registered Office Address:							
	STE 300							
	St. Petersburg	33702 L						
e chai ent w is/we	mited liability company is not organized under the lange or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members also of organization or the operating agreement of the identical production.	of the register liability comp of the limite	red office and the business office of the register pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in pility company.					
	ure of a member or authorized representative of a member		Printed or typed name of signee					

provisions of an stances retained 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.

Obvious Position - Assistant Secretary

Signature of Registered Agent