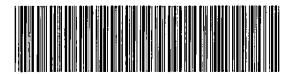
## L22000327456

(Requestor's Name)				
(Address)				
(Address)				
<b>,</b> ,				
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(Cit	y/State/Zip/Pnon	e #)		
PICK-UP	☐ WAIT	☐ MAIL		
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(Do	cument Number)	<del></del>		
Certified Copies	Certificates	s of Status		
Special Instructions to	Filing Officer:			
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Office Use Only



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	COVER LETTER					
TO: Registration Section	•	•	4 4 2			
TO: Registration Section Division of Corporations		3	, ·			
APC&R LLC						
SUBJECT:						
Nai	me of Limited	Liability Company	•			
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Off	fice Change a	nd fee(s) are submit	ted for filing.			
Please return all correspondence concerning th	is matter to th	ne following:				
Brad House						
Name of Person						
APC&R LLC						
Firm/Company						
515 Ninth St E Suite 212						
Address						
Bradenton, FL 34208						
City/State and Zip Code						
brian@seroof.com						
E-mail address: (to be used for future and	nual report no	tification)				
For further information concerning this matter	, please call:					
Brian LaBrune	941	310-4860				
	at (	)				
Name of Person		Area Code & D	aytime Telephone Number			
Mailing Address:		Street Addre	ss:			
Registration Section		Registration S				
Division of Corporations		Division of C				
P.O. Box 6327		The Centre of				
Tallahassee, FL 32314			roe Street, Suite 810			
		Tallahassee, l				
Enclosed is a check for the following	amount:					
\$25 Filing Fee		\$55 Filing Fee & C	ertified Copy			
, INHS18 (2/14)						

## 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.

	APC&R LLC			
1. N	ame of the limited liability company: 515 Ninth St E Suite 212			
2. (a)			(b)	
<b>(</b> -)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Bradenton, FL 34208			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	7/25/2022		L220003274	156
3. 5. (a)	Date of filing/registration in Florida Bradley A House	4.		Document number
	Registered Agent and Registered Office shown on the records of 515 Ninth St E Suite 212	the Flori	da Dept. of Stat	TALL SECTION OF THE PROPERTY O
	Registered Office Address MUST BE FLORIDA STREET	<u>ADDRES</u>	<u> </u>	
	Bradenton, Fl	34208 L	-	
(b)	Brian LaBrune			5 6
	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	<u>ddress:</u>	
	515 Ninih St E Ste 2/2		-	
	NEW Registered Office Address:			_
	Brokeston, FL 34708			_
	, FI		¥34208	?_
chang agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited his were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of the registe ability of the lin	e State of Flo red office an ompany, it is nited liabilit	orida, it is hereby confirmed that after the d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
Sign	attire of a member or authorized representative of a member		Brace	Printed or typed name of signee
I here provis the obtometrifie	eby accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I tell in writing of this change.	ree to ac perforn d for in hereby c	et in this can	acity. I further garee to comply with the