L22000367002

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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2023 JUL -6 PM 6: 29

SECRETARY OF STATE

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	365 WEKIVA, LLC ECT:			
Name of Limited Liability Company				
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered (Office Change and fee(s) are submitted for filing.		
Please	return all correspondence concerning	this matter to the following:		
DANI	EL J. FREES			
	Name of Person			
	Firm/Company			
14681	ENGLERT ALLEY			
	Address			
ORLA	NDO, FL 32827			
	City/State and Zip Code	2		
	EES@GMAIL.COM E-mail address: (to be used for future a			
	rther information concerning this matt	·		
	Daniel Frees Name of Person	at (805) 660 - 0053 Area Code & Daytime Telephone Number		
	Mailing Address:	Street Address:		
	Registration Section	Registration Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	The Centre of Tallahassee		
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the followi	ng amount:		
	■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified 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.

	(b)	
Principal office address of limited liability compa- (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
365 WEKIVA SPRINGS ROAD	146	681 ENGLERT ALLEY
LONGWOOD, FL 32779	OR	RLANDO, FL 32827
08/22/2022	1.220	000367002
Date of filing/registration in Florida	4.	Document number
)		
Registered Agent and Registered Office shown on the rec	ords of the Florida Dep	of, of State:
FREES, DANIEL J		
Registered Office Address (MUST BE FLORIDA ST	3ET	
3546 RODRICK CIRCLE		
ORLANDO	32824	ZO23 JUL -6
	FL	
		PH 6
Enter name of NEW Registered Agent and/or NEW Reg	gistered Office address	6: 29
		. 5
FREES, DANIEL J		
NEW Registered Office Address:		
14681 ENGLERT ALLEY		
ORLANDO	. F1. ³²⁸²⁷	
		e of Florida, it is hereby confirmed that af
limited liability company is not organized under	the laws of the Stat	Oliva and the business office of the equiptors
e or changes are made, the Florida street address will be identical. Or, in the case of a Florida limi	of the registered of ited liability compa	my, it is hereby confirmed that the change(s
e or changes are made, the Florida street address will be identical. Or, in the case of a Florida limi ere authorized by an affymative vote of the mem	of the registered of lited liability compa nbers of the limited	my, it is hereby confirmed that the change(s liability company or as otherwise provided
e or changes are made, the Florida street address will be identical. Or, in the case of a Florida limi	of the registered of ited liability compa nbers of the limited of the limited liabil	my, it is hereby confirmed that the change(s liability company or as otherwise provided lity company.
e or changes are made, the Florida street address will be identical. Or, in the case of a Florida limi ere authorized by an affymative vote of the mem	of the registered of ited liability compa nbers of the limited of the limited liabil	my, it is hereby confirmed that the change(s liability company or as otherwise provided