

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000023425 3)))



H240000234253ABCVV

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

Fax Number

: (850)617-6383

From:

Account Name : BUSINESS FILINGS Account Number : 105256001620 Phone : (608)827-5300 Fax Number : (608)827-5501

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

Email Address: nbarker@renderotrust.com



LLC REGISTERED AGENT CHANGE CE SELLER REPRESENTATIVE LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

Fax Audit # H24000023425 3

To:

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.

ŧ.	Na	me of the limited liability company: CE Seller Repr	esentativ	/e	LLC
2. (a)	2550 Goodlette Rd. N.	(b)	3665 East Bay Drive, Suite 204, MB 435
•	,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (-,	<i>'</i> -	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Naples, Florida 34103	_	_	Largo, Florida 33771
		9/2/2022	_	L	L22000386629
3.		Date of filing/registration in Florida	4.		Document number
5. (a	ลา	CORPORATION SERVICE COMPANY			
	,,	Registered Agest and Registered Office shown on the records of the	ie Florida	D	Dept. of State:
		1201 HAYS STREET			
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	Ł	
		TALLAHASSEE	32301		
(b)	5)	Business Filings Incorporated			EACH CAR
		Enter name of NEW Registered Agent and/or NEW Registered 9	Office add	I.6	m.
		1200 South Pine Island Road			년
		NEW Registered Office Address:			
			·		<u> </u>
		Plantation FL_	33324		
the c agen was/	hai twe	mited liability company is not organized under the law ange or changes are made, the Florida street address of to ill be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of cles of organization of the operating agreement of the l	the regist bility con the limi imited li	n m ite	ered office and the business office of the registered apany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in
Sie	1100	the of a member of authorized representative of a member		111	Printed or typed name of signee
i he prov the a	reb isio ibli ere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	e to act erforma for in C ereby co	in me he mj	
<u>(/</u>	<u> </u>	Chris Das, AVP, Business Filings Incorpo	rated		
Signu	sh a	e of Registered Agent			

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00