(Requestor's Name)			
(Address)			
(Äddress)	-		
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
J DENNIS			
JUL 1 9 2023			

Office Use Only



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## COVER LETTER

TO: Registration Sect Division of Corp					
SUBJECT: Sharp Glass	LLC				
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered	Agent/Registered Off	ice Change an	d fee(s) are submitted for filing.		
Please return all correspo	ndence concerning th	is matter to the	e following:		
Brian Sharp			•		
1	Name of Person	•	<del></del>		
Sharp Glass LLC					
I	irm/Company				
440 SE 2nd Ave #C3					
	Address		<del></del>		
Deerfield Beach, FI 33441					
City	State and Zip Code	-	<del></del>		
Brian@sharpglassllc.net					
E-mail address: (to	be used for future ann	nal report not	ification)		
For further information co	oncerning this matter,	please call:			
Brian Sharp		954 at (	501-4877		
Name of	Person	(	Area Code & Daytime Telephone Number		
Mailing Address Registration Section of Cortain P.O. Box 6327 Tallahassee, FL	ction porations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a cho	eck for the following	amount:			
SU\$25 Filing Fee		<b>-</b>	\$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.

1. N	ame of the limited liability company: Sharp Glass LLC		
2. (a)	440 SE 2nd ave #C3	(b)	
(1)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Deerfield Beach, FI 33441		
	09/19/2022	1.220004	06833
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	UNITED STATES CORPORATION AGENTS, INC		
· (w)	Registered Agent and Registered Office shown on the records of 476 RIVERSIDE AVE	the Florida Dept. of S	State:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	<u> </u>
	Jacksonville	32202	3F C
(b)	Brian Sharp		SECRETAL 2023 MAY 1
	Enter name of NEW Registered Agent and/or NEW Registered	l Office address:	916 537 051
	440 Se 2nd ave #C3		PH 2:
	NEW Registered Office Address:		28 : 15% TE
	Deerfield Beach	33441	
	P.L	-	<del></del>
change igent v was/wa	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liater authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registered office ability company, i of the limited liabi	and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in
Signa	ture of a member or authorized representative of a member	<u>-</u>	Printed or typed name of signee
provisi he obj o mer iotifie	by 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 lely reflect a change in the registered office address, I is discontinuous this change.	performance of n	iv duties, and I am familiar with and accept

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

3XHS18 (2714)