## L22 000 411684

(Requestor's	Name)
(Addross)	
(Address)	
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(City/State/Z	p/Phone #)
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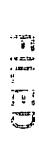


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MALLARASSECTION

2022 OCT | 8 PH 2:



## **COVER LETTER**

TO: Registration Section Division of Corporation	ens							
SUBJECT: Heavily Inve	ested, LLC							
Name of Limited Liability Company								
Dear Sir or Madam:								
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.								
Please return all correspondent	ce concerning this matter to the following:							
Nidia Delgadillo								
Name	of Person							
Heavily Invested, LLC								
Firm/	Company							
1187 N. 1200 W. Ste	. 300							
Add	ress							
Orem, UT 84057								
City/State	and Zip Code							
renewals@veil.com								
E-mail address: (to be us	ed for future annual report notification)							
For further information concer	ning this matter, please call:							
Nidia Delgadillo	at (888 ) 7277387							
Name of Perso	n Area Code & Daytime Telephone Number							
STREET/COURIER	ADDRESS: MAILING ADDRESS:							
Registration Section	Registration Section							
Division of Corporation								
Clifton Building	P.O. Box 6327							
2661 Executive Center Tallahassee, Florida 32	· ·							
Enclosed is a check for	r the following 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

FI	orida	2.						
1.	Na	me of the limited liabil	ity company: Heavily Inve	ested	, LLC	<del></del>		
2	(a)			_ (b)	)			
۷.	( <i>a</i> )		ress of limited liability company:  **BE STREET ADDRESS**)	_ (0)	Ma	iling address of lin Note: MAY BE I		
		9330 SW 61st Way	Unit C		9330 SW	61st Way U	Jnit C	
		Boca Raton, FL		- -	Boca Rato	n, FL 33428		
		08/30/2018			L220004 <sup>-</sup>	11684		
3.			registration in Florida	4.	Ľ	Ocument numb	ber	
_		Desistered Agents						
٥.	(a)		tered Office shown on the records of th	e Florida	Dept. of State:		202	
							)0C	
		Registered Office Address	(MUST BE FLORIDA STREET A	DDRESS				
		7901 4th St N					TALL AHASSEL	
		St. Petersburg	, FL	33702				.7
	(b)	Joseph Tomcz	j zyk				ا سم	7
	(0)	Enter name of NEW Regis	tered Agent and/or NEW Registered (	Office add	iress:			
		9330 SW 61s	t Wav					
		NEW Registered Office A	<u> </u>	•	<del></del>			
		Unit C						
		Boca Raton	, FL	3342	3			
the ag	ent w	nge or changes are mad will be identical. Or, in are authorized by an aff	y is not organized under the law de, the Florida street address of the case of a Florida limited lia firmative vote of the members of the operating agreement of the l	the regist bility co f the lim	stered office ompany, it is nited liability liability comp	and the busines hereby confirm company or as pany.	ss office of the control of the cont	he registered hange(s)
		poch for	ed representative of a member		<u> </u>	Printed or typed n	mozyk	
I pr	here ovisi e obl mer	ha annual the annual to	ent as registered agent and agre tive to the proper and complete p as registered agent as provided the registered office address, I h	ee to act perform I for in ( ereby c	in this cana	nite I further	amree to com	iply with the h and accept s being filed has been
/	D	CPlv (Toun fr re of Registered Agent	Joseph Tomczyk	•	1			
<b>/</b> 01	سسب	to or reconstruction						

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