1/19/23, 8:09 AM

Page: Plof 4 2073-31-1006:11-42007 Division of Conformation Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H23000022909 3)))



H230000229093ABC.

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		ZOZZ JAN
	Fax Number : (850)617-6383		
From:			
	Account Name : LEGALZOOM.COM :	INC.	A Z
	Account Number : I20010000062 Phone : (323)962-8600		=
	Fax Number : (323)389-0502		
ns	the email address for this busine nual report mailings. Enter only o	ne email address p	
ns	nual report mailings. Enter only o	ENT CHANGE	
ns	nual report mailings. Enter only on ail Address: LLC REGISTERED AG	ENT CHANGE	
ns	nual report mailings. Enter only of ail Address: LLC REGISTERED AG 12316 SANNENWO	ENT CHANGE	lease.**
ns	LLC REGISTERED AG 12316 SANNENWO	ENT CHANGE	

Electronic Filing Menu

Corporate Filing Menu

Help

From Laura Rodriguez

COVER LETTER

	Registration Section Division of Corporations					
SUBJE	12316 SANNENWOOD LLC					
		Name of Limited Liability Company				
Dear Sir	or Madam:					
The encl	losed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.			
Please re	eturn all correspondence concerning th	is matter to the	following:			
Cheye	nne Moseley					
	Name of Person		_			
Legalz	oom.com, Inc.					
	Firm/Company		<u>-</u>			
101 N.	Brand Blvd., 11th Floor					
	Address					
Glenda	le, CA 91203					
-	City/State and Zip Code	•	_			
randi@	cuttingedgepromotions.com					
E-n	nail address: (to be used for future ann	ual report notifi	cation)			
For furth	er information concerning this matter.	please call:				
Cheyen	ne Moseley	800 _ at (773-0888 ext 9724			
	Name of Person	(Area Code & Daytime Telephone Number			
R D C 2-	TREET/COURIER ADDRESS: Legistration Section Division of Corporations Diffion Building 661 Executive Center Circle allahassee, Florida 32301	Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, Florida 32314			
E	nclosed is a check for the following	amount:				
	\$25 Filing Fee	2 4 S55	Filing Fee & Certified Copy			

FILED ALL ETARY OF SIACH ALL NOT SERVICAL

2022 JAN 19 AM 11: 27

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.

i. Na	me of the limited liability company: 12316 SANNI	ENWCOD LLC			
2. (a)	7947 River Rock Rd.	(b) 7947 F	7947 River Rock Rd.		
	Principal office address of limited liability company:		Mailing address of limited liability company:		
	(Non: MUST BE STREET ADDRESS) Dolray Boook El 22446	Delegii	(Note: MAY BE POST OFFICE BOX)		
	Delray Beach, FL 33446	Deiray	Beach, FL 33446		
	09/30/2022	L220004	423121		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	United States Corporation Agents, Inc.				
J. (a)	Registered Agent and Registered Office shown on the records of t	he Florica Dept. of Su	ate:		
	5575 S. Semoran Blvd., Suite 36				
	Registered Office Address (MUST BE FLORIDA STREET A	DORESSI	_		
	Orlando, FL	32822			
(b)	Randi Rosenbaum				
()	Enter name of NEW Resistered Agent and/or NEW Resistered	Office address:			
	7947 River Rock Rd.				
	NEW Registered Office Address:		_		
	Delray Beach	33446			
the cha agent v was/we the ani	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liz- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	vs of the State of F the registered offi ability company, it if the limited liabil	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in		
<u> Ro</u>	ndi Rosla	Randi Rose	nbaum		
-	ture of a member or authorized representative of a member		Printed or typed name of signee		
I here provisi the obt to merc notified	hy accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, 1) I in writing of this change.	ee to act in this ca performance of m d for in Chapter A tereby confirm tha	pacity. I further agree to comply with the y duties, and I am Jamiliar with and accept 55. F.S. Or, if this accument is being filed it the limited liability company has been		
12/	O-AL ROSA -	Ranci Rosenb			