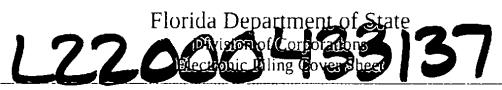
Division of Corporations



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.

(((H23000396664 3)))



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

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (813)436-5206

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

Email	Address:	_	

LLC REGISTERED AGENT CHANGE THE MODERN RENAISSANCE MAN, LLC

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

Electronic Filing Menu — Corporate Filing Menu

Help K. Brumbley

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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l. Na	me of the limited liability company:The Modern Renais	ssance Mar	, LLC		_		
2. (a)		(b)					
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability (Note: MAY BE POST OFFIC				-	
_	10/07/22	· . —	200043313				
3.	Date of filing/registration in Florida	4.		Document nun	nber		
5. (a)	INC AUTHORITY RA						
	Registered Agent and Registered Office shown on the records of the	ie Florida Do	pt. of State	;			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)					
	390 NORTH ORANGE AVE., STE 2300-N						
	ORLANDO FL 3	32801	<u> </u>				
(h)	Registered Agents Inc				*** , **	2023	
(b) .	Enter name of NEW Registered Agent and/or NEW Registered (Office addre	<u>ss</u> :			NO.	نتر
	7901 4th St N				*	2023 NOV 1 6	四至
	NEW Registered Office Address:	· <u>-</u>				A	
	STE 300				•	Ö	:
	St. Petersburg	33702			•	96	
	, FL	_					
the cha agent v was/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the registe bility com the limite	red office pany, it is d liability	and the busing hereby confirm or a	ess office med that	of the	registered ange(s)
	Robbin Joney	Robin J	ones				
_	ture of a member or authorized representative of a member			Printed or typed	`	•	
provisi the obl to merc not <u>ifi</u> ce	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change.	performan for in Che ereby conf	this capa ce of my a upter 605, urm that t	icity. I further luties, and I an , F.S. Or, if the he limited liah	agree to i familia is docum ility com	complex with sent is lepany h	ly with the and accept being filed as been
	David Roberts - Assistant Sec re of Registered Agent	cretary					