## Florida Department of State Division of Corporations ecreptic Filing Cover Steet

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## LLC REGISTERED AGENT CHANGE ORLANDOREDPOODLES&DOODLES LLC

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## 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.

3 (n)	ame of the limited liability company: Original occur occurs.  2241 Palmetto Glen Dr	/h.\	
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Kissimmee,Florida (US)34741	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10/18/2022 12:00:00 AM	L22	000447788
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	LEGALING CORPORATE SERVICES INC.		
	Registered Agent and Registered Office shown on the records o	f the Florida Dep	pt. of State;
	476 Riverside Ave.		120
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	TEC SIEC
	Jacksonville, F	L <sub>32202</sub>	TALLAHASSEE FLORIO
(6)	Corporate Creations Network Inc.		Fr. 0
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office addres	
	801 US Highway I		
	NEW Registered Office Address:		
	North Palm Beach	L <sup>33408</sup>	
	, F.	L <u></u> -	<del></del>
hange gent v vas/we	imited liability company is not organized under the late or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registered of ability compa of the limited	ffice and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in
	$\langle \mathcal{O} \rangle$	Danielle	W. Gossman, Special Manager
Signat	ture of a member or authorized representative of a member		Printed or typed name of signee
rovisi he obl o merc	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide By reflect a change in the registered office address, I I'in writing of this change.	performance ed for in Chap	of my duties, and I am familiar with and accept oter 605, F.S. Or, if this document is being filed
		Gossman,	Special Secretary

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