## 12200465486

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
J. HORNE APR 15 2024							

Office Use Only



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FILED 2024 APR 12 AM 10: 19

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To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext:

Date: 04/12/24 Order #: 1473311-6

Re: WEST END INDUSTRIES LLC

Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25.00

120000000195

AUTH

Please take the following action:

File on a routine basis Issue proof of filing

Return evidence to the following:

ATTN: Amanda Miller

c/o Corporation Service Company

251 Little Falls Drive

Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## 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: WEST END IN	DUSTRI	IES	LLC				
2. (a)								
,	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )		ν-,		s of limited liability of BE POST OFFICE	company:		
	1133 BAL HARBOR BLVD, SUITE 1139. #266			1133 BA	L HARBOR E	BLVD, SUITE 113	39. #266	
	PUNTA GORDA, FL 33950		PUNTA GORDA, FL 33950					
	10/31/2022		L22000465486					
3.	Date of filing/registration in Florida	— 4.	-		Document n	number		
5. (a)								
5. (a)	Registered Agent and Registered Office shown on the records of	the Flori	da D	ept. of Sta	te:			
	Cogency Global Inc.			•				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_			
	115 North Calhoun Street, Suite 4							
	TALLAHASSEE	32301			_	<b>20</b>		
		<u> </u>			_	024 APR 12 \$80 APR 443 "AUL JOASS		
(b)	Enter name of NEW Registered Agent and/or NEW Registered				_		<u> </u>	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office a	ddr	ess:		7	FLED	
	forporation Service Company			AH IO:				
	NEW Registered Office Address:							
	1201 Hays Street				·			
	Tallahassee FI	32301						
change agent v was/w	imited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	register ability c of the lir	red com mite	office an pany, it i ed liabilit	nd the busines is hereby cont ty company o	ss office of the re- firmed that the ch	gistered nange(s)	
	Christopher W Sutton	Ch	rist	opher W				
•	sture of a member or authorized representative of a member				• • •	ned name of signee		
provisi the obi to mer notifie	by accept the appointment as registered agent and agrifons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It does not this change.	perforn	lane	ce of my i	auties, and L	am familiar with	and accept	
	Inc. C. K. W. C.							

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