12/14/23, 2:53 PM

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.

(((H23000426700 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

From:

Account Name

: COMPUTERSHARE

Account Number : 110432003053

Phone

: (561)694-8107

Fax Number

: (561)214-8442



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

Email Address:

LLC REGISTERED AGENT CHANGE SHAKARA'S LLC

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

Electronic Filing Menu

Corporate Filing Menu K. SALY

Help

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: Shakara's LLC					_
2. (a)	4480 SW Tulip Ave	(t	4480 SW	4480 SW Tulip Ave		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`		Mailing address of limited liab (Note: MAY BE POST OF		_
	Nocatee, FL 34268		Nocatee,	FL 34268		_
	11/30/2022 12:00:00 AM		L22000503	3909		
3. 5. (a)	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.		Document number		_
<i></i> (α,	Registered Agent and Registered Office shown on the records of 476 Riverside Ave	of the Florida	Dept. of Sta	- te:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	1	_		
	Jacksonville, F	L_32202		-	2023 DEC 14 PM 4: 11	_
(b)	Corporate Creations Network Inc.			•	8554H 41 0	į
	Enter name of NEW Registered Agent and/or NEW Registere	d Office ad	resi:	_	in to	
	801 US Highway I				PH 4: 11	
	NEW Registered Office Address:			_	E =	
	North Palm Beach	L 33408		_		
change agent : was/w	imited liability company is not organized under the la cor changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	tws of the e registere iability con of the limited li	d office an npany, it i ted liabilit ability con	nd the business office of the s hereby confirmed that the ty company or as otherwise inpany.	e registered e change(s)	i c
C:	Kristen Espinales	Krist	en Espinale	s, Attorney-in-Fact		_
I here provisi the obi to mer notifie	ture of a member or authorized representative of a member by accept the appointment as registered agent and ag ions 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, I d in writing of this change.		in this cap nce of my hapter 60: nfirm that	Printed or typed name of sign acity. I further agree to co duties, and I am familiar v b, F.S. Or, if this documen the limited liability compa		r of f
	Kristen Espinales Kristen Espinales, Special Secretary re of Registered Agent					