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(Requestor's Name)			
(Ad	dress)		
(Address)			
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(Cit	y/State/Zip/Phone	₽#)	
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PICK-UP	L WAII	MAIL	
(Bu	siness Entity Nan	ne)	
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Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		

Office Use Only



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2023 HOV -9 PH 3: 40

RECEIVED



Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 11/9/2023		₩WALK	[N*
entity name 3302	Enterprise, LLC		
	-		
DOCUMENT NUMBEI	R		
	PLEASE FILE THE AT	TACHED AND RETURN	
xxxxxxxx	Plain Copy		
	Certified Copy		
	Certificate of Status		
	PLEASE OBTAIN THE FOLLOW	VING FOR THE ABOVE ENTITY	
	Certified Copy of Arts & A.	mendments	
	Certificate of Good Standing		
	APOSTILLE' / NOTA	RIAL CERTIFICATION	
COUNTRY OF DESTIN	YATION		
NUMBER OF CERTIFIC	CATES REQUESTED		
TOTAL OWED \$25		ACCOUNT #: I20160000072	
		S. 8 FM	
Please call Tina at	the above number for any	issues or concerns. Thank you so much!	

COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Divi	sion of Corporations				
SUBJECT:	3302 Enterprise, LLC				
SOIMLE II	Name of Limited Liability Company				
Dear Sir or M	Madam:				
The enclosed	d Registered Agent/Registere	ed Office Change	and fee(s) are submitted for filing.		
Please return	all correspondence concern	ing this matter to	the following:		
R REMP					
	Name of Person				
Harbor Comp	diance				
	Firm/Company				
1830 Colonia	l Village Lane				
	Address				
Lancaster, PA	A, 17601				
	City/State and Zip C	ode			
professional@	harborcompliance.com				
E-mail	address: (to be used for futu	re annual report r	otification)		
For further in	nformation concerning this n	natter, please call:			
R REMP		717 at (844-6897)		
	Name of Person		Area Code & Daytime Telephone Number		
Reg Divi P.O.	ling Address: istration Section ision of Corporations . Box 6327 ahassee. FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Encl	losed is a check for the folk	owing amount:			
= \$2	25 Filing Fee	C	\$55 Filing Fee & Certified Copy		

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	dame of the limited liability company: 3302 Enterprise.	LLC	
2. (a)	3302 ENTERPRISE ROAD FORT PHRCE EL 34982	(b) ^{32:}	5 WEST MAIN STREET, BABYLON, NY 11702
- . (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)
	12/09/2022		000518461
3. 5. (a	Date of filing/registration in Florida GROSSO, JOSEPH D. JR	4.	Document number
(**	Registered Agent and Registered Office shown on the records of 850 NW FEDERAL HIGHWAY	the Florida Dept	of State:
	Registered Office Address	ADDRESS)	2023 NOV
	STUART	34994	· · · · · · · · · · · · · · · · · · ·
(b)	Registered Agents Inc		
(-,	Enter name of NEW Registered Agent and/or NEW Registered	Office address	3. t ₀
	NEW Registered Office Address: 7901 4th St N Ste 300		
	St. Petersburg, FL	33702	
chang agent was/w	limited liability company is not organized under the lave or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liavere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registered off ability compaint of the limited	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
_/<	Michael Buoncore alure of a member or authorized representative of a member	Michael F	<u> </u>
I here provis the ob to men notific	alure of a member or authorized representative of a member selve accept the appointment as registered agent and agresions of all statutes relative to the proper and complete digations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change. David Roberts The of Registered Agent	ee to act in th performance d for in Chapt hereby confiri	Printed or typed name of signee ais capacity. I further agree to comply with the of my duties, and I am familiar with and accept ter 605, F.S. Or, if this document is being filed in that the limited liability company has been