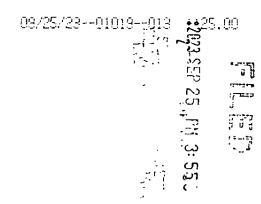
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COVER LETTER

TO: Registration Section Division of Corporations	•
Our Kindred Minds LLC SUBJECT:	
Name of Lim	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Jacquelyn Stevens Zimmerman	
Name of Person	
Our Kindred Minds	
Firm/Company	
4515 31st Place East	
Address	
Palmetto	
City/State and Zip Code	
ourkindredminds@gmail.com	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	all:
Jacquelyn Stevens Zimmerman 94	1 320-6830
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	:
■ \$25 Filing Fee	□ \$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.	Na	me of the limited liability company: Our Kindred Min	ds LLC		
2	(a)	4515 31st Place East Palmetto, FL 34221		b) 4515 31	st Place East Palmetto, FL 34221
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.		12/12/2022 Date of filing/registration in Florida	— - 4.	L2200052	20826 Document number
		- 10 (· · · · · · · · · · · · · · · · · ·			
3.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State Paul Zimmerman Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 4515 31st Place East		- 2023 SEP	
		Palmetto	34221		
		, FL			O1 1 ;
	(b)				
		Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	: ÷ 📆 '
		Jacquelyn Stevens Zimmerman			
		NEW Registered Office Address:	.,		_
		4515 31st Place East			
		Palmetto , FL	34221		
cha age wa	inge ent y s/we	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liard authorized by an affirmative vote of the members of the organization or the operating agreement of the	register ability c of the lin limited	red office a ompany, it nited liabil	and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.
- 5	igna	ure of a member or authorized representative of a member	-	· · ·	Printed or typed name of signee
pro the to	visio dbf mere	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have the writing of this change.	ce to ac perform d for in hereby c	t in this ca ance of m Chapter 6 confirm tha	spacity. I further agree to comply with the y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been
ę;,	\checkmark	of Registered Agent			
SIE	anarui	t of Registered Agent			EV. 2004