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To:

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

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## LLC REGISTERED AGENT CHANGE 16595 CENTIPEDE STREET 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.

| 1. N                                 | ame of the limited liability company: 16595 CENTIPED  | DE STREET L                                    | LLC  |
|--------------------------------------|---|--|--|
| 2. (a)                               |   | (b) _  |  |
| ()                                   | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)   | (/-  | Mailing address of limited liability company: (Note: MAY RE POST OFFICE ROX) |
|                                      | 7901 4th St N STE 300   | 7'   | 901 4th St N STE 300   |
|                                      | St. Petersburg FL 33702   | S  | t. Petersburg FL 33702   |
|                                      | 12/14/22  | L22  | 2000523316   |
| 3.                                   | Date of filing/registration in Florida  | _ <sub>4.</sub> _                              | Document number  |
| 5. (a)                               | UNITED CORPORATE SERVICES, INC.   |  |  |
| J. (a)                               | Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  |  |  |
|                                      | 3458 LAKESHORE DRIVE  |  |  |
|                                      | Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  |  |  |
|                                      |   |  | —— ARSFEB TI   |
|                                      | TALLAHASSEE , FI  | 32312  |  |
| (b)                                  | Northwest Registered Agent LLC  | _  | PR T   |
| ( )                                  | Enter name of NEW Registered Agent and/or NEW Registered Office address:  |  | <u></u>  |
|                                      | 7901 4th St N   |  | 55   |
|                                      | NEW Registered Office Address:  |  | <del></del>  |
|                                      | STE 300   |  |  |
|                                      | St. Petersburg , FI   | 33702  |  |
| 10.1                                 | · · · · · · · · · · · · · · · · · · ·   |  |  |
| the ch                               | limited liability company is not organized under the la<br>ange or changes are made, the Florida street address of<br>will be identical. Or, in the case of a Florida limited li  | f the register                                 | red office and the business office of the registered                         |
| was/w                                | ere authorized by an affirmative vote of the members of   | of the limite                                  | d liability company or as otherwise provided in                              |
| the art                              | icles of organization or the operating agreement of the   | limited liab                                   | otity company.<br>Nat Smith  |
| Sime                                 | ature of a member or authorized representative of a member  |  | Printed or typed name of signee  |
| I here<br>provis<br>the ob<br>to mer | thy accept the appointment as registered agent and aginous 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 all in writing of this change.  Taylor Newman - Assistant S | e performance<br>ed for in Cha<br>hereby confi | this capacity. I further agree to comply with the                            |
| Signate                              | / 7 W / Value   | ,  |  |