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SW

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

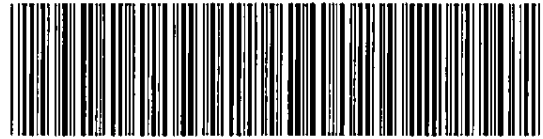
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Between Tierras LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHAD SAKONCHICK

Name of Person

BetterLegal Inc

Firm/Company

5473 Blair Rd., Suite 100, PMB 35833

Address

Dallas, TX 75231

City/State and Zip Code

filings@betterlegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHAD SAKONCHICK at (+1) 512-969-2339

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

INHS18 (2/14)

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. Name of the limited liability company: Between Tierras LLC

2. (a) 13620 WILDGRASS MEADOW DRIVE (b) 13620 WILDGRASS MEADOW DRIVE

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

APT 304

RIVERVIEW, FL 33578

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

APT 304

RIVERVIEW, FL 33578

01/04/2023

L23000010502

3. Date of filing/registration in Florida

4. Document number

5. (a) ZENBUSINESS INC.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

336 E. COLLEGE AVE.

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

SUITE 301

TALLAHASSEE, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FL

(b) Registered Agents Inc

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

7901 4th St. N

NEW Registered Office Address:

STE 300

St. Petersburg, FL 33702

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Saire Aguerrido Cartwright

Signature of a member or authorized representative of a member

Saire Aguerrido Cartwright

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Bill Havre, Authorized Representative of Registered Agents Inc

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00