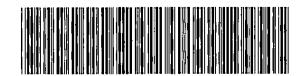
## L230000 26850

(Re	questor's Name)					
(1.0	,4200.0101101100)					
(Address)						
<b>(</b>	,					
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(Cit	y/State/Zip/Phone #	)				
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Name	)				
(Do	cument Number)					
Certified Copies	_ Certificates of	Status				
Special Instructions to	Filing Officer:					
		1				

Office Use Only



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## **COVER LETTER**

INHS18 (2/14)

TO: Registration Section Division of Corporations					
Saba Operations, LLC SUBJECT:					
	Name of Limited	d Liability Company			
Dear Sir or Madam:					
The enclosed Registered Agent/Regis	stered Office Change a	and fee(s) are submitted for fili	ng.		
Please return all correspondence conc	cerning this matter to t	he following:			
Cynthia Davies					
Name of Per	son				
Cindy's Florida LLC					
Firm/Compa	ıny				
8051 N. Tamiami Trail STE E6			_ · · · · · · · · · · · · · · · · · · ·		
Address			•		
Sarasota, Florida, 34243			•		
City/State and Z	ip Code		· •		
reports@cloudpeaklaw.com					
E-mail address: (to be used for	future annual report no	otification)			
For further information concerning th	nis matter, please call:				
Cynthia Davies	727 at (	300-0042			
Name of Person	ar (	Area Code & Daytime T	elephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallaha 2415 N. Monroe Stree			
Enclosed is a check for the	following amount:				
■ \$25 Filing Fee	0	□ \$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	ame of the limited liability company:  Saba Operations	s, LLC				
2. (a)	8051 N. Tamiami Trail STF F6		8051 N. Tamiami Trail STE E6			
2. (a)			(0)	(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  Sarasota, Florida. 34243		
	Sandsout, Fronta, 54245			Jurusota, Frontan.		
	01/12/2023		ł	_23000026850		
3.	Date of filing/registration in Florida	4.	_	Docum	nent number	<u> </u>
5. (a)	NORTHWEST REGISTERED AGENT LLC					
J. (a)	Registered Agent and Registered Office shown on the records of	of the Flo	orida	Dept. of State:		
	7901 4TH ST. N STE 300					
	Registered Office Address (MUST BE FLORIDA STREET	T ADDR	ESS)			
						7.0
	ST PETERSBURG , F	TL_3370	12		*1.1	
(b)	Cindy's Florida LLC	•				TKO C Y
	Enter name of NEW Registered Agent and/or NEW Registers	ed Office	e add	ress:		***
	8051 N. Tamiami Trail STE E6					= ⇔ ⊕
	NEW Registered Office Address:					
	Sarasota , F	L 3424	3			
change agent v was/w	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e regis liability of the	tereo cor limi	I office and the bi npany, it is hereb ted liability comp	usiness office of y confirmed the	of the registered at the change(s)
Lynt	hia Davisa ture of a member or authorized representative of a member	(	Cyntl	nia Davies, Manage	er	
Signa	ture of a member or authorized representative of a member			Printed	l or typed name of	signee
provisi the obl to mer	hy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of this change.	gree to e perfo led for i hereby	act i rmai in Ci v coi	n this capacity. I nce of my duties, napter 605, F.S. ( nfirm that the limi	further agree and I am famili Or, if this docu ited liability co.	to comply with the ar with and accept ment is being filed mpany has been
ynth	ria Davies					
∕>ignatu	re of Registered Agent					