## 123000031680

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
wrong form					



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February 7, 2024

FRESH AIR ADVANTAGE LLC 621 E LEHIGH DR DELTONA, FL 32738

SUBJECT: FRESH AIR ADVANTAGE LLC

Ref. Number: W24000021387

We have received your document for FRESH AIR ADVANTAGE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Stacy Prather Regulatory Specialist III

Letter Number: 224A00002757

## COVER LETTER

SUBJECT: FRESH AIR ADVANTAGE LLC	61.7			
Na	ume of Limited	Liability Company		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Of	ffice Change an	d fee(s) are submitted for filing.		
Please return all correspondence concerning t	his matter to the	e following:		
WENDI COE				
Name of Person		<del></del>	, 23	
FRESH AIR ADVANTAGE LLC		HIT AC C	2024 JAN 1 1 AM 9: 30	Œ
Firm/Company		AH S	<b>Z</b>	Ĺ
621 E LEHIGH DR		SSE SSE		
Address		بن <u>ج</u> ت	و ا	•
DELTONA, FLORIDA 32738		177	Ö	
City/State and Zip Code		<del></del>		
WENDIC04@HOTMAIL.COM				
E-mail address: (to be used for future ar	inual report not	fication)		
For further information concerning this matte	r, please call:			
WENDI COE	386 at (	473-8769		
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 followin		S55 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.

. Na	me of the limited liability company:  Fresh Air Advan	tage LLC			
. (a)	621 E Lehigh Dr, Deltona Fl 32738	(b)			
(a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	01/17/2023	1.2300	00031680	<u></u>	
	Date of filing/registration in Florida	4.	Document nu	mber	
5. (a)					
, (u)	Registered Agent and Registered Office shown on the records o	f the Florida Dept.	of State:		
	United States Corporation Agents, INC			<b>202</b> SE	
	Registered Office Address	(ADDRESS)		ALL One Dry	اجالت
	476 RIVERSIDE AVE.			2024 JAN 1 I SECNEJAR TALLAHA	economic processo
	Jacksonville, F	L_32202	·	· · · · ·	m
(b)	Wendi Coc			AM 9:38 OF STATE SSEE, FL	O
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office address:	<del></del>	7.TE	
	621 E Lehigh Dr				
	NEW Registered Office Address:		<del></del>		
	Deltona				
	, F	32739			
hange gent v vas/w he art Signa	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited last ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the last of a member or authorized representative of a member	aws of the State he registered off liability compar of the limited l e limited liabili Wendi Co	ice and the business by, it is hereby confi- iability company or ty company.  Printed or types	office of the regreemed that the cha as otherwise pro	istered inge(s) vided in
provis he obi o mer notifie	by 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.  The of Registered Agent	e performance ( led for in Chant	of my auties, and 1 a er 605 - F.S Or. if u	ım jamıttar witti d his document is b	ma accepi eine filed