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5/13/2024

COVER LETTER

Division of Corporations			
The Ninth Shambhala, LLC dba Solfe SUBJECT:	eggio No. 9		
Nam	e of Limited L	iability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	ce Change and	fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to the	following:	
Debra A. Hertzog			
Name of Person			
The Ninth Shambhala, LLC dba Solfeggio No. 9			
Firm/Company			
5250 Chatsworth Court			_
Address			2024 F. SEC.
Orlando, FL 38212			RETA RETA
City/State and Zip Code			形 8
debra@solfeggio9.com			2024 HAY -8 PH 3: 19 SECRETARY OF STATE SECRETARY SEE. FL
E-mail address: (to be used for future annu	ual report notif	ication)	FL 19
For further information concerning this matter,	please call:		ę r i
Debra A. Hertzog	689 at (246-6025	
Name of Person	(Area Code & Daytime Telep	phone 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 Tallahasse 2415 N. Monroe Street, S Tallahassee, FL 32303	e
Enclosed is a check for the following	amount:		
□ \$25 Filing Fee	 \$	55 Filing Fee & Certified Copy	1
INHS18 (2/14) & ALREADY PAID &	\$35.00		

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	lame of the limited liability company:	Shambhala, LL	C dba Solfe _l	zgio No. 9
2. (a)	5250 Chatsworth Court, Orlando, EL 32812		5250 Cha	atsworth Court, Orlando, FL 32812
Σ. (α)	Principal office address of limited liability comparts (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.	01/19/2023 Date of filing/registration in Florida	4.	L23000036	Document number
5. (a	Legal Zoom, Inc.			,
J. (u	Registered Agent and Registered Office shown on the rec LegalZoom.com, Inc Cheyenne Moseley, Author Registered Office Address (MUST BE FLORIDA ST	rized Representa	a Dept. of Sta ative	- UNITED STATES - CURPORATION AGENTS, FOR - 476 DIVERSIDE AVE JACKSUN VIIIC, FL.
	9900 Spectrum Drive			- 476 LIVERSIDE AVE.
	Austin, TX 78717	, FL		- (AcKGINVIlle, FL
(b)				- 322°Z
	Enter name of NEW Registered Agent and/or NEW Reg	istered Office ac	ldress:	S. 26
				2024 HAY -8 SECRETAR TALLAH
	NEW Registered Office Address:	_ .		AA I
	5250 Chatsworth Court			
	Orlando	, FL		PM 3: 19 OF STAT
chang agent was/w	limited liability company is not organized under the or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the menticles of organization or the operating agreement	of the register ited liability con bers of the lin	ed office ar ompany, it i nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	Alexa A. Dechar		ora A. Hertze	
	ature of a member or authorized representative of a member			Printed or typed name of signee
pkovis the of to me	ebylaccept the appointment as registered agent as signs of all statutes relative to the proper and con slightions of my position as registered agent as pr refly reflect a change in the registered office addr at in writing of this change.	nd agree to acc aplete perform ovided for in (ess, I hereby c	in this cap ance of my Chapter 60, onfirm that	pacity. I further agree to comply with the duties, and I am Jamiliar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signat	ure of Registered Agent			
	Division of Corporations•			issee, FL 32314
	FILI	NG FEE: \$25	.00	