Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fex audit number (shown below) on the top and bottom of all pages of the document.

(((H24000007522 3)))



H240000075223ABCVV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

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.\*\*

Email Address:\_\_\_

## LLC REGISTERED AGENT CHANGE **B4B - BUSINESS FOR BUSINESS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

T. LEMIEUX

1

<u>ب</u>

HAN 08 2024

Electronic Filing Menu Corporate Filing Menu

## 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.

I. Na	ame of the limited liability company: _	348 - BUSINESS FOR	BUSINESS L	LC	
2. (a)			(b)		
•	Principal office address of limited liab (Note: MUST BE STREET AL	ility company:	(0)	Mailing address of limited (Note: MAY BE POST	Hiability company:
			147		
	01/19/23		L2300003	8652	
3.	Date of filing/registration in 1	Florida 4.		Document number	
5. (a)	CENTER GROUP CORP.				
. , , , , ,	Registered Agent and Registered Office shown	on the records of the Flo	orida Dept. of S	tate:	
	8350 NW 52ND TERRACE		·		
	Registered Office Address (MUST BE FL)	ORIDA STREET ADDR	(ESS)	<del></del>	
	SUITE 301		<del></del>		28
	2024	<u> </u>	· <del>-</del>		? જુ
	DORAL	FL_3316	6 		
. 1	Registered Agents Inc				U
(b)	Enter name of NEW Registered Agent and/or	NEW Davistared Office	addens.	<del>_</del>	t
	interest in the second	MEN REgistered Office	e aduress;		
	7901 4th St N				5:
	NEW Registered Office Address:				ယ
	STE 300				
		<del></del>	<del></del>	_	
	St. Petersburg	, FL	2		
				<del></del> -	
ne cha:	mited liability company is not organize ngc or changes are made, the Florida st	reet address of the re	coistered offi	or and the business of the	ice of the registered
igeni w	All be identical. Or, in the case of a Flo	orida limited liability	v company, it	is hereby confirmed the	at the change(s)
vas/we	re authorized by an affirmative vote of cles of organization or the operating ag	the members of the	limited liabil	ity company or as other	wise provided in
	Pulson beauty		lobin Jones		
Signate	ure of a member of authorized representative of	a member		Printed or typed name of	signee
	ny accept the appointment as registered ons of all statutes relative to the proper gations of my position as registered ag ly reflect a change in the registered off in writing of this change.	agent and agree to and complete perfo ent as provided for ice address, I hereb	act in this ca rmance of m in Chapter 60 y confirm tha		_
<u> </u>	Ad Caverts David Roberts	- Assistant Secretar	ту		
Signatur	e of Registered Agent				