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

(((H24000210432 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 : (888)705-7274 Fax Number : (888)706-7274

\*\*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 204 VALENCIA LLC

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## H240002104323

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 204 VALENCIA LLC	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	hange and fec(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Alicia Richards	
Name of Person	
Registered Agent Solutions, Inc.	
Firm/Company	
Corporate Center One, 5301 Southwest Pkwy, Stc 400	
Address	
Austin, TX 78735	
City/State and Zip Code	
E-mail address: (to be used for future annual r	eport notification)
For further information concerning this matter, plea	se call:
Alicia Richards	888 705-7274
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 amo	ount:
□ \$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.

2. (a)	204 VALENCIA ROAD	(b) 204 VALENCIA ROAD		
(u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0)	Mailing add	dress of limited liability company: MAY BE POST OFFICE BOX)
	WEST PALM BEACH, FL 33401	W	EST PALM BEAG	CH, FL 33401
	Ti r			
	2/2/2023	L230	000061948	
3. 5. (a)	Date of filing/registration in Florida BOWER, WHITNEY	4.	Docume	nt number
). (a)	Registered Agent and Registered Office shown on the records of a 204 VALENCIA ROAD	the Florida Dep	t. of State:	حى
	Registered Office Address (MUST BE FLORIDA STREET	(DDRESS)	*********	芦苇
	1.55			Car
	WEST PALM BEACH , FL	33401		TALLAHASSET FLORIDA
(b)	Registered Agent Solutions, Inc.			17. E 6.
	Enter name of NEW Registered Agent and/or NEW Registered	Office address	į.	95 35 B
	NEW Registered Office Address:			
	Ste. A			
	Taltahassee , FL	32308		
change agent v was/wo	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered of bility compa f the limited	Tice and the busing, it is hereby of liability compan	iness office of the registered confirmed that the change(s)
!s!	Whitney Bowers ture of a member or authorized representative of a member	Whitney		Manager
Signal	ture of a member or authorized representative of a member		Printed or	r typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and agro ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I h I in writing of this change.	ee to act in the performance I for in Chap wereby confir	nis capacity. I fi of my duties, an ter 605, F.S. Or m that the limite	arther agree to comply with the ad I am familiar with and accept r, if this document is being filed a liability company has been

Mackenzie Hibler, Asst. Secretary

Signature of Registered Agent