L2300

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.

(((H240000386893)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : FILE RIGHT LLC Account Number : I20170000091 Phone

: (718)878-5811

: (718)732-4580 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Emn√1	Address:			
Ciliant	MUDICAL.	 		

LLC REGISTERED AGENT CHANGE WELCOME DEVELOPERS LLC

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

COVER LETTER

H240000386893

TO:	Registration Section			
	Division of Corporations			

Division of Corporations	
SUBJECT: WELCOME DEVELOPERS Name of Li	LLC imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matte	er to the following:
Mark Fuchs	
Name of Person	
File Right RA Services, LLC	
Firm/Company	
1425 37th Street, Suite 201	
Address	
Brooklyn, NY 11218	
City/State and Zip Code	
agent@fileacorp.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please	call:
Sara Ringel at (718 878-5811
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section Division of Corporations
Division of Corporations P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amoun	nt: H24000038689
■ \$25 Filing Fee INHS18 (2/14)	\$55 Filing Pee & Certified Copy

H240000386893

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. Na	ome of the limited liability company: WELCOME	DEVE	LOPE	RS LLC			
2 (4)	3611 14TH AVENUE, UNIT 600	(b)					
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- (*) -	М	Mailing address of limited liability company: (Note: NAY BE POST OFFICE BOX)			
	BROOKLYN, NY 11219						
3.	2/16/2023		L2300	0074597			
J.	Date of filing/registration in Florida	4.		Document number			
5. (a)	Business Filing Incorporated	_					
	Registered Agent and Registered Office shown on the records of the	ic Florida De	pt. of State:				
	1200 South Pine Island Rd, Plantation, FL 33326					~•	
	Registered Office Address (MUST BE FLORIDA STREETA	DDRESS)			ط ج	2024 JAN 3 1	
					AC:	ي	المالية
		 			,	Z	COLUMN I
					T	$\frac{\omega}{2}$	()
					NY S		
(h)	File Right RA Services, LLC				L-1	<u> </u>	72220
(0)	(b) File Right RA Services, LLC Enter name of NEW Registered Agent and/or NEW Registered		1 2:		m.	AM 10: 46	A NORTH
	, ,					ل 1	
	625 E Twiggs Street, Sle. 110					_	
	NEW Registered Office Address:						
	TEST REGISTERS Office Alexanders						
	Tampa, FL_33602	<u></u> .					
change agent was/w	Emited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registered o bility comp f the limite	office and pany, it is d liability	the business office hereby confirmed company or as oth	e of the re that the c	egistere: hange(s	1)
	Mark Fuchs			horized Person			
Signature of a member or authorized representative of a member				Printed or typed name	of signee		
I here provis the obtonic notifie	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided welly reflect a change in the registered office address, I had in writing of this change.	ee to act in performand I for in Cha ereby conf	this capa te of my d opter 605, irm that t	ain I finithan ama	e la cani	oly with and ac being j has bee	the cept îled en
	Mark Fuchs ure of Registered Agent						