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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053

Phone : (561)694-8107 Fax Number : (561)214-8442

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## LLC REGISTERED AGENT CHANGE **FOISON LLC**

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S. ROBERTS

MAR - 5 2024

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## 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)	9216 Hawks Haven Ct	(b	9216 Hawks Haven Ct
<b>-</b> . (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(3	Mailing address of limited liability company; (Note: MAY BE POST OFFICE BOX)
	Jacksonville, FL 32222		Jacksonville, FL 32222
	02/13/2023		L23000078896
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	LEGALING CORPORATE SERVICES INC.		
	Registered Agent and Registered Office shown on the records of	of the Florida	fa Dept. of State:
	476 Riverside Ave.		<b>202</b> ວິເປ ກິດ
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	2024 MAR -4 SECTALL ATTASS
	Jacksonville , F	L 32202	ASSEL
	Corporate Creations Network Inc.		9:50
	Enter name of NEW Registered Agent and/or NEW Registers	ed Office ad	ddress:
	801 US Highway I		
	NEW Registered Office Address:		
	North Palm Beach, F	L_33408	
change agent v was/wa	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 lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registere liability co of the lim	red office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
	Kristen Espinales	Kris	isten Espinales, Attorney-in-Fact
Signa	nture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obi to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, I d'in writing of this change.	gree to act e performe ed for in C hereby co	t in this capacity. I further agree to comply with the nance of my duties, and I am familiar with and accep Chapter 605, F.S. Or, if this document is being filed confirm that the limited liability company has been

Kristen Espinales, Special Secretary

Kristen Espinales

Signature of Registered Agent