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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: WELTECO LLC		
Name	of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	natter to the following:	
Andrii Oleshko		
Name of Person		
WELTECO LLC		
Firm/Company		
1825 Liberty st.		
Address		
Hollywood FL 33020		
City/State and Zip Code		
ukrcgm@gmail.com		
E-mail address: (to be used for future annua	report notification)	
For further information concerning this matter, p	case call:	
Nikita Oleshko	10:00am +1(754)707-10-47	
Name of Person	Area Code & Daytime Teleph	one 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, Su Tallahassee, FL 32303	iite 810
Enclosed is a check for the following a	nount:	
■ \$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.

(a)			(b)	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1825 Liberty st.		1825 Liber	rty st.
	Hollywood FL 33020		Hollywoo	d FL 33020
	02/10/2023		L230000843	392
	Date of filing/registration in Florida	4.		Document number
. (a)	None 1825 Liberty st. Hollywood FL 33020			
. (4)	Registered Agent and Registered Office shown on the records of	f the Flor	ida Dept. of Stat	- e:
	None			
	Registered Office Address (MUST BE FLORIDA STREET	<u> ADDRE</u>	<u>(SS)</u>	_
	1825 Liberty str.			
	Hollywood , F	L_33020		023 AL
(b)	Andrii Oleshko 1825 Liberty st. Hollywood FL 33020			TIL 2023 AUG 21 SECNETARY TALL AHA
(0)	Enter name of NEW Registered Agent and/or NEW Registers	d Office	address:	ZI R
	Andrii Oleshko			ED PH 4:00 OF STATE SEE, FL
	NEW Registered Office Address:		•	-
	1825 Liberty str.			_
	Hollywood, F	L_33020		_
nange gent v as/w ne art	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 learn authorized by an affirmative vote of the members icles of organization or the aperating agreement of the members of t	e registe iability of the li e limited	ered office an company, it is imited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
Signa	nure of a uniforce or authorized representative of a member			Printed or typed name of signee
here roviși	by accept the appointment as registered agent and as ions 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	gree to a e perfor ed for ir hereby	ect in this cape mance of my o Chapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
ie obj mer stifie	d in whiting of this change.	·		

FILING FEE: \$25.00

INHS18 (2/14)