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PICK-UF	WAIT MAIL
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	(Business Entity Name)
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Special Instructions to	Filing Officer:
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COVER LETTER

TETRIPON LLC SUBJECT:	
	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 r	natter to the following:
ALBINA IALALOVA	
Name of Person	
I LOVE ACCOUNTING LLC	
Firm/Company	
1445 DOLGNER PL, STE 25	
Address	
SANFORD, FL 32771	
City/State and Zip Code	
albinaialalalova@gmail.com	
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matter, pl	ease call:
ALBINA IALALOVA	407 473-1323 at ()
Name of Person	Area Code & Daytime Telephone Numbe
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 at	mount:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

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) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1235 Providence Blvd R Deltona, FL 32725 Deltona, FL 32726 The limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the florida or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the obligations of all statutes relative to the proper and complete performance of mi duties, and I am dimitar with and accept the obligations of the sequence of the proper and complete performance of mi duties, and I am dimitar with and accept the obligations of the proper and complete performance of mi duties, and I am dimitar with and accept the obligations of the proper and complete performance of mi duties, and I am dimitar with and accept the obligations of the proper and complete performance of mi duties, and I am dimitar with and accept the proper and complete performance of mi duties, and I am dimitar with and accept	l. Na	ame of the limited liability company:TETRIPON LLC						<u>.</u>	
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Deltona, FL 32725 ALBINA IALALOVA Registered Agent and Registered Office shown on the records of the Florida Dept. of State: ALBINA IALALOVA Registered Office Address ALBINA IALALOVA Registered Office Address LAKE MARY FL 32746 Deltona, FL 32746 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: 1335 Providence Blvd R Deltona, FL FL 32725 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Supparature of a member of agent and agree to act in this capacity. In further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duries, and Long foundation than the limited liability company has been notified in writing of this change. Printed or typed name of signer.		·							
3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: ALBINA IALALOVA Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 308 SILVER PINE DR LAKE MARY FL 32746 Enter name of NEW Registered Agent and/or NEW Registered Office address: OLEKSANDR LOBATIUK NEW Registered Office Address: 1235 Providence Blvd R Deltona. FL FL Johnson FL If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a nemberled authorized representative of a member I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am Janitiar with and accept the depoint of the agree of the proper and complete performance of my duties, and I am Janitiar with and accept the suppointment as registered agent approved for in Chapter 603. F.S. Or, it does does not for the proper of the registered of the proper and complete the performance of my duties, and I am Janitiar with and accept the appointment as pregistered agent approved for in Chapter 603. F.S. Or, it does does not form the proper of the registered of the content of the registered of the content of the registered of the content of the registered of the registere				1235 Pro	vidence Blvd	idence Blvd R			
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Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314 FILING FEE: \$25.00