

L23000103482

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

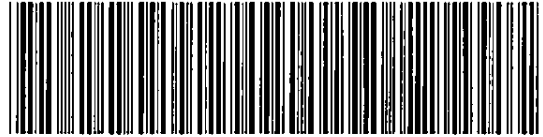
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STATE
OFFICE, FL
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R. HUNT

03/08/24

**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. Name of the limited liability company: Electree LLC
2. (a) 915 8th street #206, Miami Beach, Florida 331
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
915 8th street #206
Miami Beach, Florida 33139
- (b) 915 8th street #206, Miami Beach, Florida
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
915 8th street #206
Miami Beach, Florida 33139

3. February 27, 2023 Date of filing/registration in Florida
4. L23000103482 Document number

5. (a) Republic Registered Agent LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1150 NW 72ND AVE TOWER I

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

STE 455

Miami, FL 33126

- (b) Kevin Engelman

Enter name of NEW Registered Agent and/or NEW Registered Office address:

915 8th Street

NEW Registered Office Address:

#206

Miami Beach, FL 33139

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.

Kevin Engelman
Signature of a member or authorized representative of a member

Kevin Engelman

Printed or typed name of signee

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 familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Kevin Engelman
Signature of Registered Agent

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Electree 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 matter to the following:

Kevin Engelman

Name of Person

Electree LLC

Firm/Company

915 8th street #206

Address

Miami Beach, Florida 33139

City/State and Zip Code

kevin@electreenyc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Engelman at (646) 235-0251

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

2006-11-8 AM 7:07
STATE
TALLAHASSEE, FL