L23000107479

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COVER LETTER

TO: Registration Section

Division of Corporations						
SukhaClub LLC						
SUBJECT: Name of						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.					
Please return all correspondence concerning this ma	atter to the following:					
Derek Larsen-Chaney						
Name of Person						
Spencer Fane LLP						
Firm/Company						
201 N. Franklin Street, Suite 2150						
Address						
Tampa, Florida 33602						
City/State and Zip Code	_ 					
dlursenchaney@spencerfunc.com						
E-mail address: (to be used for future annual r	eport notification)					
For further information concerning this matter, plea	se call:					
Derek Larsen-Chancy	813 424-3526					
Name of Person	Area Code & Daytime Telephone 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, Suite 810 Tallahassee, FL 32303					
Enclosed is a check for the following amo	ount:					
■ S25 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.

1. N	ame of the limited liability company: SukhaClub LLC	C 		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Tampa, Florida 33606		Tampa, Flo	orida 33602
	3/1/2023		L23000107-	
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Registered Agent and Registered Office shown on the records Spensery, Inc. Registered Office Address (MUST BE FLORIDA STREE	of the Florid	da Dept, of Stat	
	201 North Franklin Street, Suite 2150			
	Tampa	FL_33602		100.00 W TV 31.12
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> Bryan Tissot	red Office a	<u>ddress</u> :	
	NEW Registered Office Address:			
	1705 W. State Street			_
	Tampa	FL		_
change agent v was/we the arti	imited liability company is not organized under the corchanges are made, the Florida street address of t will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the true of a member or authorized representative of a member	he registe liability c s of the lit he limited	red office an ompany, it is nited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
I hare provisi the obi to mer notified	by accept the appointment as registered agent and a sions of all statutes relative to the proper and comple ligations of my position as registered agent as providely reflect a change in the registered office address, d in writing of this change.	igree to ac le perforn ded for in I hereby c	et in this cape nance of my e Chapter 605 confirm that	acity. I further garee to comply with the
	D1 11) D.,, (22	Ma Tallakas	C1 22214