



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations Fax Number (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE RCF ONLINE CONSULTING LLC

Centificate of Status	0
Centified Copy	0
Page Count	02
Estimated Charge	\$25,00

2024 HAR 29 PH 2: DEFANDALLI OF STAT DIVISION OF CORPORATION

Electronic Filing Menu — Corporate Filing Menu

Help

M. SOLOMON MAR 2 9 2024

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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florido

(a)		(b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liabi <u>CNote: MAY BE POST OF</u>	•	:
	03/01/23	L230	00108390		
	Date of filing/registration in Florida	4.	Document number		
(a)	REPUBLIC REGISTERED AGENT LLC				
****	Registered Agent and Registered Office shown on the record	of State	21		
	1150 NW 72ND AVE TOWER I		2024 1		
	Registered Office Address	ET ADDRESS)		7. 70	-
	STE 455			29	Ī
	MIAMI	. FL_ ³³¹²⁶		P	į.
(b)	Registered Agents Inc			կ։ 06	ι.
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>		J,		
	7901 4th St N				
	NEW Registered Office Address:				
	STE 300	·			
	St. Petersburg	33702 .FL			

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.

Palica Janey	Robin Jones
Signature of a member or authorized representative of a member	Printed or typed name of signee

Thereby 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 natified in writing of this change.

David Roberts - Assistant Secretary

FILING FEE: \$25,00

Signature of Registered Agent