L23000 10911do

(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Stomoso Zilli) (tomo)						
(Document Number)						
Certified Copies Certificates of Status						
Control Laboration of Siling Officer						
Special Instructions to Filing Officer:						
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Office Use Only



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COVER LETTER

	Registration Section Division of Corporations					
SUBJEC	Red Owl Capital LLC					
Name of Limited Liability Company						
Dear Sir	or Madam:					
The encl	osed Registered Agent/Registered Office	Change an	nd fee(s) are submitted for filing.			
Please re	eturn all correspondence concerning this r	natter to th	e following:			
Andrew	Pierce					
	Name of Person		 -			
CINDY	S FLORIDA LLC					
	Firm/Company	<u> </u>				
8051 N.	Tamlami Trail STE E6					
	Address					
Sarasota	a, Florida, 34243					
	City/State and Zip Code					
reports@	⊋cloudpeaklaw.com					
E-r	mail address: (to be used for future annua	l report not	ification)			
For furth	ner information concerning this matter, pl	ease call:				
Andrew	Pierce	307 at (683-0983			
•	Name of Person	at (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			
i	Enclosed is a check for the following ar	nount:				
í	■ \$25 Filing Fee	ū	\$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. Na	ame of the limited liability company:	LLLC					
2. (a)	8051 N. Tamiami Trail STE E6	(8051 N. Tamiami Trail STE E6				
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (-, <u></u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	Sarasota, Florida, 34243		Sarasof	ta, Florida, 34243			
	03/01/2023		L230001	09166			
3. 5. (a)	Date of filing/registration in Florida GIBSON, DAYENE	4.		Document number			
J. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1326 E COMMERCIAL BLVD						
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) #1060						
	OAKLAND PARK , FL 33334						
(b)	CINDY'S FLORIDA LLC						
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:						
	8051 N. Tamiami Trail STE E6			2024 JC			
	NEW Registered Office Address:						
				_ = = = = = = = = = = = = = = = = = = =			
	Sarasota , FL	34243					
change agent was/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lise ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	register ability co of the lir limited	red office a ompany, it nited liabil	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.			
Signa	ture of a member or authorized representative of a member	_		Printed or typed name of signee			
provis the ob to mer	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I l d in writing of this change.	ee to ac perfor n d for in hereby c	t in this ca sance of m Chapter b confirm the	spacity. I further agree to comply with the y duties, and I am familiar with and accep 05, F.S. Or, if this document is being filed at the limited liability company has been			
Signati	re of Registered Agent						