Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone 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.

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LLC REGISTERED AGENT CHANGE ORGANZA SWAMP MANAGEMENT LLC

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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.

ame of the limited liability company:	/AMP MANAGEI	MENT LLC	
7901 4th St N #22367	(b) ⁷⁹	(b) 7901 4th St N #22367	
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
St. Petersburg, FL 33702	Si	t. Petersburg, FL 33702	
		3000126438	
	4.	Document number	
Registered Agent and Registered Office shown on the records	nt the Florida Dej	pt. of State.	
2894 REMINGTON GREEN LANE	_		
Registered Office Address <u>(MOST BE FLORIDA STREE</u>	T ADDRESS)		
SUITE A			
TALLAHASSEE	FL 32308	2024	
Northwest Registered Agent LLC		AUG TAPE	
	red Office addres	12 PH	
7901 4th St N		APPRUVED FILED FILED STORY	
<u>NEW</u> Registered Office Address:	 - -	 	
STE 300			
St. Petersburg	33702 FL	_	
ange or changes are made, the Florida street address 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 member of a member of authorized representative of a member of authorized representative of a member of authorized to the proper and completions of all statutes relative to the proper and completing of all statutes relative to the proper and completing of the proper and completely reflect a change in the registered office address,	of the register liability comp s of the limited he limited liab Nai Smi	ed office and the business office of the registered bany, it is hereby confirmed that the change(s) of liability company or as otherwise provided in lility company. In Printed or typed name of signee	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) St. Petersburg. FL 33702 Date of filing/registration in Florida REGISTERED AGENT SOLUTIONS, INC. Registered Agent and Registered Office shown on the records 2894 REMINGTON GREEN LANE Registered Office Address (MUST BE FLORIDA STREE SUITE A TALLAHASSEE Northwest Registered Agent LUC Enter name of NEW Registered Agent and/or NEW Register 7901 4th St N NEW Registered Office Address: STE 300 St. Petersburg limited liability company is not organized under the ange or changes are made, the Florida street address 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 agent of a member of authorized representative of a member of authorized repres	### Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	