Division of Corporations

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 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 AKC EATERY ON WHEELS LLC

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4/29/202∮ →2₂07:12₂PDT To: 18506176383 Page: 2/2 Fax: 8134365206

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.

2. (a)			(b)	
•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Date of filing/registration in Florida	 4.	L23000138	B183 Document number
٠.	Date of imagregistration in Florida	٦.		Document named
i. (a)	LEGALCORP SOLUTIONS, LLC		***********	
	Registered Agent and Registered Office shown on the records	of the Flore	da Dept. of Sta	ate:
	3440 W HOLLYWOOD BLVD. SUITE 415			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRE.	SS)	_
	·		_	
				<u> </u>
	HOLLYWOOD	FL 33021		
	The state of the s			202
(15)	Registered Agents Inc			
(0)	Enter name of NEW Registered Agent and/or NEW Register	ed Office :	iddress;	2024 523 29
				29
	7004 415 04 41			at .
	7901 4th St N NEW Registered Office Address:			
	NEW Registered Villes Address.			
	STE 300			
				·
	St. Petersburg	FI 33702		
		<u> </u>		
he cha gent v vas/we	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the membericles of organization or the operating agreement of the	of the rep liability s of the li	gistered officompany, it mited liabil	ce and the business office of the register is hereby confirmed that the change(s) ity company or as otherwise provided in
1	The way were	R	nbin Jones	
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
l herei provisi he obl o mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provid by reflect a change in the registered office address, I in writing of this change.			

- Assistant Secretary

David Roberts

David Spents Signature of Registered Agent