## 123000139429

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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## \*\*\*IMPORTANT NOTICE\*\*\*



APPROVED OR REJECTED TO THE ADDRESS BELOW.

# INC AUTHORITY REPLY ATTN: CORPORATE MAINTENANCE LEAST

1450 VASSAR ST RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

2023 AUG 22 PH 12: 4

TO:

PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING:

Dept. of State

**Division of Corporations** 

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM:

Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE:

Wednesday, August 16, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

Change of Registered Agent

For: HYDE AWAY RENTALS LLC

We have included payment in the amount of \$25.00 for the following fees:

Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

#### Please return the file stamped copy to the address below:

Processing Department 1450 Vassar St Reno NV 89502

#### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: HYDE AWAY RENTALS, LLC		
Name of Lim	ited Liability Company	
Dear Sir or Madam;		
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Corporate Maintenance Lead		
Name of Person		
Processing Department		
Firm/Company		
1450 Vassar St		
Address		
Reno, NV 89502		
City/State and Zip Code		
E-mail address: (to be used for future annual repor	t notification)	
For further information concerning this matter, please co	all:	
Corporate Maintenance Lead at ( 80	00	
Name of Person	Area Code & Daytime Telephone Number	
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Parkened in a short of the Parkened in		
Enclosed is a check for the following amount	:	
☑ S25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

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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.

i. N	ame of the limited liability company: HYDE AW	AY RENTALS,	LLC
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)
-			<del>.</del>
	03/20/2023	-L230	000139429
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	)		
()	Registered Agent and Registered Office shown on the record	s of the Florida Dept	t. of State:
	HYDE, JOSHUA L		
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	
	1860 COMMODORE POINT DR		20:
	FLEMING ISLAND	. FL <u>32003</u>	ขเพียนักเป็
(b)			22 Chia
(0)	Enter name of NEW Registered Agent and/or NEW Regist	ered Office address	
	Inc Authority RA		P#12: 40
	NEW Registered Office Address:		
•	390 North Orange Ave., Ste 2300-N		<u>.</u>
	Orlando	, FL_32801	
Signat Nas/we he arti	imited liability company is not organized under the or changes are made, the Florida street address of tivill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member des of organization of the operating agreement of the of a member of authorized representative of a member of a membe	the registered off liability companies of the limited liability li	ice and the business office of the registered by, it is hereby confirmed that the change(s) is billity company or as otherwise provided in ty company.  If the printed or typed name of signse is capacity. I further agree to comply with the
·	to of Registrood Agent		