## Florida Department of State Division of Corporations Electrodic Eiling Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

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\*\*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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## PEPER OF PRINCE STATEMS OF STATEM

## LLC REGISTERED AGENT CHANGE HART TO HEART CREATIONS LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu C

Corporate Filing Menu

Help

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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.

. Na	ame of the limited liability company:	ions I	.LC	
. (a)	10410 HIGHWAY 87 NORTH	, <u> </u>		
- \->	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	MILTON, FL 32570	_	MILTON,	FL 32570
	05/01/2024		L230001508	819
. (a)	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.		Document number
(-)	Registered Agent and Registered Office shown on the records of the 476 RIVERSIDE AVE.	e Flor	ida Dept. of State	- e;
	Registered Office Address (MUST BE FLORIDA STREET A)	DDRE	<u>55)</u>	-
	JACKSONVILLE . FL	32202		
(b)	Corporate Creations Network Inc.			2024
	Enter name of NEW Registered Agent and/or NEW Registered C	Office	address:	2024 HAY -
	801 US Highway 1			<u> </u>
	NEW Registered Office Address:			PH 7:
	North Palm Beach	33408		$\frac{1}{\omega}$
hange gent v as/we ne arti Signa	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liabere of a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete prigations of my position as registered agent as provided the profession of the provided of the proper and complete prigations of my position as registered agent as provided the profession of the provided of the proper and complete prigations of the proper and complete prigations of my position as registered agent as provided the profession of the proper and complete prigations are provided to the proper and complete prigations are provided	egiste oility of the li mited Es	ered office and company, it is mited liability I liability com strella Tavarez,	I the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in inpany.  Attorney-in-Fact  Printed or typed name of signee

Signature of Registered Agenty