1	23	0001	56	115
	والمكتب المتقا			

(Requestor's Name)	-
(Address)	_
(Audiess)	
(Address)	-
(City/State/Zip/Phone #)	_
(Business Entity Name)	—
(
(Document Number)	-
Certified Copies Certificates of Status	-
	٦
Special Instructions to Filing Officer:	
	1

.

Office Use Only



03/20/24--01003--011 **35.00



ہ د براد

S HUNT 03/20/21 **COVER LETTER**

Registration Section TO: **Division of Corporations**

ationg Liary L SUBJECT:

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

lationa Rodriguez Tationg Liany LLC 382 NE 191 St PMB # 316207 MIAMI PL 33179-3899 City State and Zin Code tatianaliary music agmail. Com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Attana RodAguez at (615) 983-9767 Name of Person 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

Enclosed is a check for the following amount:

S25 Filing Fee



INH\$18(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.

I. Na	me of the limited liability company: <u>TAtiana Liary LUC</u>
2. (a)	<u>382 NE 1915+ PMB#316207</u> Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS) (b) <u>382 NE 1915+ PMB #316207</u> Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Hiami FL, 33179-3899 Hiami FL, 33179-3899
3.	3 28 2023 Date of filing/registration in Florida 4. Document number
5. (a)	United States Corporation Agents Inc Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	476 Riverside Ave. Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Jacksonville .FL 38202
(b)	Tatiana Rodriguez
	382 NE 191ST PHB #316207
	.FL 33179
change agent w was/wei	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the or changes are made, the Florida street address of the registered office and the business office of the registered ill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) re authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the of organization or the operating agreement of the limited liability company.
Signan	are of a member or sutherized representative a member Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this conge

Signature of Registered Agent

Division of Corporations+ P.O. Box 6327+ Tallahassee, FL 32314 FILING FEE: \$25.00