8/14/23, 1.45 PM

Division of Corporations

Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

**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 **EVERYDAY IDEAS LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
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Corporate Filing Menu

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COVER LETTER

2023-08-14 11:48 18 PDT

TO: Registration Section Division of Corporations			
SUBJECT: EVERYDAY IDE	AS LLC		
		iability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.	
Please return all correspondence concerning thi	s matter to the	following:	
Cheyenne Moseley			
Name of Person		_	
Legalzoom.com, Inc.			
Firm/Company	-		
101 N. Brand Blvd., 11th Floor			
Address		_	
Glendale, CA 91203			
City/State and Zip Code		-	
rchaves33@gmail.com			
E-mail address: (to be used for future ann	ual report notif	ication)	
For further information concerning this matter,	please call:		
Cheyenne Moseley	800	773-0888 ext 9 7 24	
Name of Person	\	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following	amount:		
□ \$25 Filing Fee	☑ \$.	55 Filing Fee & Certified Copy	
INHS18 (2/14)			

То

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.

1. N	nme of the limited liability company: EVERYDAY	IDEAS	LLU				
2. (a)	6796 Palmetto Cir. S. Apt. 204	((b) 6796 Palmetto Cir. S. Apt. 204				
() .	Principal office address of limited liability company. (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	Boca Raton, FL 33433	aton, FL 33433					
	04/05/2023		L230001	69370			
3.	Date of filing/registration in Florida	4.		Document numb	per		
5. (a)	United States Corporation Agents, Inc.			•			
(-)	Registered Agent and Registered Office shown on the records of 476 Riverside Ave. Registered Office Address (MUST BE FLORIDA STREET)	 e: 					
	Registered Office Address - QUOST BE PLONION STREET	ADUKES	27				
	Jacksonville, FI	32202	· · · · · · · · · · · · · · · · · · ·	_			
(b)	Ricardo Chaves		2023 AUG 14				
` '	Enter name of NEW Registered Agent and/or NEW Registered	-					
	6796 Palmetto Cir. S. Apt. 204		- A				
	NEW Registered Office Address:				PM 5:1		
	Boca Raton . FI	33433			12		
the cha agent v was/w	imited liability company is not organized under the la inge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the regi lability c of the lin	stered office ompany, it is nited liabilit	e and the business s hereby confirme y company or as o	s office of the registered and that the change(s)		
		Ric	ardo Cha	ves			
	ture of a member or authorized representative of a member			Printed or typed nar	•		
provisi the obt to mer	hy accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to ac e perform ed for in hereby c	t in this cap nance of my Chapter 603 confirm that	acity I further as duties, and I am J 5. F.S. Or, if this the limited liabili	gree to comply with the amiliar with and accept document is being filed ty company has been		
Signalia	re of Registered Agent						