## Florida Department of State Division of Corporations Electronio Villing Cover Sheet

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## i L

## LLC REGISTERED AGENT CHANGE ROCK YOUR ROOTS BOUTIQUE LLC

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K. Brumbley

## 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.

	ame of the limited liability company:		ie LLC		
. (a)	14460 SUGARBOWL ROAD		(b) 14460	SUGARBOWL ROAD	
•	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limite (Note: MAY BE POS	• • •
	MYAKKA CITY, FL 34251		MYAK	KA CITY, FL 34251	·····
	05/02/2024		L230001	72540	
. (a)	Date of filing/registration in Florida Rebekkah Johnson	4.		Document number	
. (4)	Registered Agent and Registered Office shown on the records	of the Flori	da Dept. of S		
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRES	<u>22)</u>	<del></del>	
	Myakka City	ET ADDRES	<u>SS)</u>		
(b)	Myakka City	34251	55)	<del></del>	20
(b)	Myakka City	FL_34251			2024   1
(b)	Myakka City  Corporate Creations Network Inc.	FL_34251			2024 HAY -
(b)	Myakka City  Corporate Creations Network Inc.  Enter name of NEW Registered Agent and/or NEW Registered	FL_34251			2024 HAY -2 PH 4:

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Estrella Tavarez, Attorney-in-Fact

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 change.

Signature of Registered Agenty