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## LLC REGISTERED AGENT CHANGE COASTAL WATER COMPANY LLC

Certificate of Status	0
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T. LEMIEUX

APR 19 2023

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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.

. Name of the limited liability company: COA	STAL W	AIEF	R COMPANY LLC				
Principal office address of limited liability comp  (Note: MUST BE STREET ADDRESS)		b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
04/11/23  Date of filing/registration in Florida	4.	L230	00178062 Document number				
i. (a) PAVLICA, JENNIFER D							
Registered Agent and Registered Office shown on the re Registered Office Address (MUST BE FLORIDA S. 3299 RIBBON GRASS DR							
MELBOURNE	, FL 3294	10	<del></del>				
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>.</u> •				
Northwest Registered Age			2023 \$				
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Re</u>	egistered Office a	<u>ddress</u> :	المحت محت أن -				
7901 4th St N							
NEW Registered Office Address:			-				
STE 300			_ A C				
St. Petersburg	<sub>FL</sub> 3370	2					
f the limited liability company is not organized under the change or changes are made, the Florida street add agent will be identical. Or, in the case of a Florida line was/were authorized by an affirmative vote of the me the articles of organization or the operating agreemen	dress of the reg mited liability o mbers of the lii	istered off company, i nited liab	fice and the business office of the regis it is hereby confirmed that the change(: ility company or as otherwise provided	tere ()			
NW Griffy Signature of a member or authorized representative of a member			NAT SMITH				
			Printed or typed name of signee				
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and confidence of my position as registered agent as properly reflect a change in the registered office additionally in writing of this change.	omptete perjori provided for in tress, I hereby (	nance oj n Chapter ( confirm th	capacity. I further agree to comply with my duties, and I am familiar with and a 605, F.S. Or, if this document is being hat the limited liability company has be	i th cce file en			
Taylor Newman - As	ssistant Secr	etary					

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