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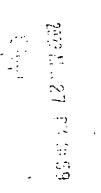
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Quainage Entity Name)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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COVER LETTER

Registration Section

TO:

INHS18 (2/14)

SUBJECT:						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Cha	inge and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter	er to the following:					
MATTHEW BAKER						
Name of Person						
GUILD ENGINEERING LLC						
Firm/Company						
7901 4TH ST N STE 300						
Address						
ST. PETERSBURG, FL 33702	· -					
City/State and Zip Code						
matthew@guildeng.com						
E-mail address: (to be used for future annual rep	ort notification)					
For further information concerning this matter, please	call:					
MATTHEW BAKER at (727 542-5001					
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 amoun	nt:					
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					

*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	ame of the limited liability company:GUILD ENGI	NEERING L	LC	
)	
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		\N	Aailing address of limited liability company: (Note: MAY BE POST OFFICE BON)
	7901 4TH ST N STE 300		7901 4TH :	ST N STE 300
	ST. PETERSBURG. FL 33702		ST. PETER	RSBURG, FL 33702
	04/12/2023		L230001810)71
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	DAVID ROBERTS			
υ. (a)	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of State	· :
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS	 Į	
	7901 4TH ST N STE 300			
	ST. PETERSBURG	FL_33702		>
(h.)	REGISTERED AGENTS INC			777
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office add	dress:	÷ ~
				Le
				7
	NEW Registered Office Address:			\pm
	7901 4TH ST N STE 300			G -
	ST. PETERSBURG	FL_33702		
change agent was/w the art	limited liability company is not organized under the corchanges are made, the Florida street address of twill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the content of the corchange agreement	laws of the he registere liability cos s of the lim he limited li	d office and mpany, it is ited liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
_W	Atthew Baker httre of a member or authorized representative of a member	MA	THEW BAL	
				Printed or typed name of signee
provis the ob. to mer notifie	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as providely reflect a change in the registered office address, d in writing of this change.	igree to act le performa ded for in (I hereby co	in this capa nce of my d hapter 605, nfirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been
Reg	istered Agents ANC			
ाष्ट्रमवस	ne or registered Agent			

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