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PICK-UP	☐ WAIT	MAIL					
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Certified Copies	_ Certificates	of Status					
Special Instructions to	Filing Officer:						
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COVER LETTER

TO: Registration Section **Division of Corporations** 4243 SW 10TH CT, LLC SUBJECT: Name of Limited Liability Company 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: Cynthia Davies Name of Person Cindy's Florida LLC Firm/Company 8051 N. Tamiami Trail STE E6 Address Sarasota, Florida, 34243 City/State and Zip Code reports@cloudpeaklaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Cynthia Davies 727 300-0042 at (Name of Person Area Code & Daytime Telephone Number **Mailing Address: Street Address:** Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: ■ \$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.	Na	me of the limited liability company: 4243 SW 10TH C	T, LLC	:		
2. ((a)	8051 N. Tamiami Trail STE E6		(b)	8051 N. Ta	miami Trail STE E6
	,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(6)		ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Sarasota, Florida, 34243			Sarasota, Flo	orida. 34243
		04/17/2023		i.	.2300019006	66
3.5.	(a)	Date of filing/registration in Florida REGISTERED AGENTS INC	4.		Ω	Document number
J. ((u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 7901 4TH ST N 300				
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
		ST. PETERSBURG FL	33702			
(b)	Cindy's Florida LLC				
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ıddı	ress:	
		8051 N. Tamiami Trail STE E6				
		NEW Registered Office Address:				:
		Sarasota , FL	34243			
chai agei was	nge nt w /we	mited liability company is not organized under the law or changes are made, the Florida street address of the zill be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe bility of f the li	red com mit	l office and ipany, it is l ed liability	the business office of the registered nereby confirmed that the change(s) company or as otherwise provided in
Cy	nt	hia Davies ure of a member or authorized representative of a member	Cy	/nth	ia Davies, M	
Øi,	gnat	ure of a member or authorized representative of a member			i	Printed or typed name of signee
prov the d to m	visio obli tere	oy accept the appointment as registered agent and agri ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I h I in writing of this change.	ee to ac perform I for in ereby c	ct in nan Ch con	n this capac ace of my du apter 605, a afirm that th	ity. I further agree to comply with the aties, and I am familiar with and accept F.S. Or, if this document is being filed a limited liability company has been
Cy Sign	natur	Tria Daviss to of Registered Agent				