

L23000194763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

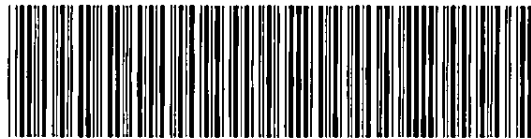
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2024 MAY 15 AM 11:49
SECURITY DIVISION
TALLAHASSEE, FL 32309

COVER LETTER

TO: Registration Section
Division of Corporations

RinneganLLC

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:

Daykel Baez

Name of Person

Firm/Company

8648 SW 15 ST

Address

Pembroke Pines / Florida 33025

City/State and Zip Code

RinneganLLC@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daykel Baez

954

743-6767

at (_____) _____

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 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. Name of the limited liability company: Linnegan LLC
8648 SW 15 ST Pembroke Pines Florida 33025 8648 SW 15 ST Pembroke Pines Florida 33025
2. (a) Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
8648 SW 15 ST Pembroke Pines Florida 33025
- (b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
8648 SW 15 ST Pembroke Pines Florida 33025
3. Date of filing/registration in Florida 05.07.24
4. Document number L23000194763

5. (a) United States Corporation Agent, Inc.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State

476 Riverside ave.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Jacksonville FL 32202

Daykel Baez

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address
8648 SW 15ST

Pembroke Pines 33025
FL

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.

Daykel Baez

Signature of a member or authorized representative of a member

Printed or typed name of signer

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 Agent

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2024 MAY 15 AM 11:49
TALLAHASSEE, FL
SECRETARY OF STATE