

L23 000 205818

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(Address)

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(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

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INHS18 (2/14)

**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: Blown Away By Balloons LLC

2. (a) 2633 Creighton Rd (b) 3600 Newton Dr
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

Unit C
Pensacola, FL 32504 Pensacola, FL 32503

04/26/2023 1.23000205818

3. Date of filing/registration in Florida 4. Document number

5. (a) Christine A. Kelly
Registered Agent and Registered Office shown on the records of the Florida Dept of State:
5707 Highway 90
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)

Milton, FL 32583

(b) Christine A. Kelly
Enter name of NEW Registered Agent and/or NEW Registered Office address:

c/o CAEK Law PLLC
NEW Registered Office Address:
600 University Office Blvd Ste 10E

Pensacola, FL 32514

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.

Donna M. McDowell
Signature of a member or authorized representative of a member

Donna M. McDowell
Printed or typed name of signer

Whereby 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]
Signature of Registered Agent

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

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