

Florida Department of State Division of Corporations Electronic Hilling Cover Street

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000167169 3)))



H240001671693ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future cannual report mailings. Enter only one email address please.

Signail Address:

LLC REGISTERED AGENT CHANGE SAND & TIDES LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

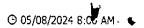
Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

MAY - 9 2024



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

→ 18506176383

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.

l. Na	ame of the limited liability company:	<u> </u>		
2. (a)	1152 Gunka Rd		(b) 1152 Gun	ka Rd
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Jacksonville, FL 32216		Jacksonvil	le, FL 32216
	04/27/2023		L230002095	556
3. 5. (a)	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.		Document number
. (4)	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.	the Flor	ida Dept. of Stat	
	Registered Office Address (MUST BE FLORIDA STREET)	1DDRE	<u>(SS)</u>	ALCAHASSEE
(b)	Jacksonville , FL	32202		PH 4: 16
	Corporate Creations Network Inc. Enter name of NEW Registered Agent and/or NEW Registered	Office		16 ORIDE
	801 US Highway 1	Once	<u>наассъ</u> у:	
	NEW Registered Office Address:			-
	North Palm Beach , FL	33408		_
hange igent v vas/we	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registe bility of the li	ered office an company, it i imited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	Kristen Espinales		Kristen Espinales, Attorney-in-Fact	
Signa	Signature of a member or authorized representative of a member		Printed or typed name of signee	
provisi he obl o mere	by accept the appointment as registered agent and agri ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided left reflect a change in the registered office address, I had in writing of this change.	ee to a perfori I for in tereby	ct in this cap mance of my Chapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been

Signature of Registered Agent Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

FILING FEE: \$25.00

Kristen Espinales, Special Secretary

Kristen Espinales