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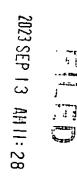
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Certified Copies	_ Certificates	s of Status								
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COVER LETTER

TO: Registration Section Division of Corporations	•
VINTAGE BELLA LLC SUBJECT:	
	d 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:
GEODGE DENDUCON II	
GEORGE DENNISON II	
Name of Person	
DENNISON & MATTHEWS, PLLC	
Firm/Company	201
7575 Dr. Phillips Blvd. Suite 170	2023 SEP 13 AM 11: 28
Address	
Orlando, Florida 32819	
City/State and Zip Code	
·	28 28
george@dennisonmatthews.com	
E-mail address: (to be used for future annual report n	
For further information concerning this matter, please call:	
GEORGE DENNISON II 407	7207441
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
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.	Na	me of the limited liability company: VINTAGE BELL	A LLC					
2.	(a)		1	(b)				
	` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		. ,	Mailing address	of limited liabi BE POST OF I	lity com	pany:
		9160 Morgana Ct			9160 Morgana Ct			
		Winter Garden, FL 34787	_		9160 Morgana Ct			<u> </u>
		05/01/2023		Į	.23000215273			
3.		Date of filing/registration in Florida	4.	-	Document nu	ımber		
5	(2)							
5. (a		Registered Agent and Registered Office shown on the records of CORPORATE AGENT ALLIANCE LLC	the Flori	da	Dept. of State:			
		Registered Office Address (MUST BE FLORIDA STREET.	10000	eei	<u> </u>			
		3300 S HIAWASSEE RD. SUITE 106	ADDKI	<u>,,,,</u>				
		ORLANDO, FI.	,32835			i vi	2023	
	(b)					<u>4.</u> 3.	2023 SEP 13	3
	. ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ıdd	ress:	***		
		CORPORATE AGENT ALLIANCE LLC				(a)	AH 11: 28	
		NEW Registered Office Address:						
		7575 DR. PHILLIPS BLVD. SUITE 170						
		ORLANDO, FL	32819					
cha age wa the	ange ent v s/we arti igna	imited liability company is not organized under the lay or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the number of a member of a depointment as registered agent and aground of all statutes relative to the proper and complete	registe ability c of the li limited	recon mir lia	d office and the business apany, it is hereby confited liability company or ability company. Printed or types on this capacity. I further over of my duties, and I a	s office of the irmed that the as otherwised as otherwised name of sign or agree to communitiary	e regis le chan le provi le pr	tered ge(s) ded in with the
the to i not	obi mere tified	igations 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.	t for in iereby c	CF (O)	iapter 605, F.S. Or, if the firm that the limited lia	his documen bility compa	it is bei my has	ng filed been
Sig	gnatu	re of Registered Agent						