

L23000222880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

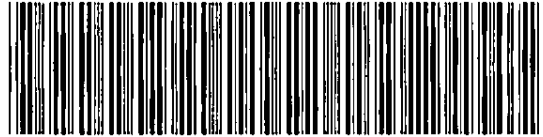
(Document Number)

Certified Copies _____ Certificates of Status _____

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J. HORNE
OCT-7 2023

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23 SEP 11 AM 13
FALLS CHURCH, VA
FALLS CHURCH, VA

**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: VENDITA CRIS LLC.

2. (a) VENDITA CRIS LLC. (b) VENDITA CRIS LLC.

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

401 E Jackson St, Suite 3300,

Tampa, FL 33602

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

401 E Jackson St, Suite 3300,

Tampa, FL 33602

05/04/2023

L23000222880

3. Date of filing/registration in Florida

4. Document number

5. (a) Doug Sullinger

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

301 W. PLATT STREET, #A311 TAMPA, FL 33606

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

301 W. PLATT STREET, #A311

Tampa, FL 33606

(b) DONALD POWELL

Enter name of NEW Registered Agent and/or NEW Registered Office address:

401 E Jackson St, Suite 3300, Tampa, FL 33602

NEW Registered Office Address:

401 E Jackson St, Suite 3300,

Tampa, FL 33602

FILED
23 SEP 11 AM 10:17
TALLAHASSEE, FLORIDA

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.

[Signature]
Signature of a member or authorized representative of a member

Donald Powell
Printed or typed name of signee

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]
Signature of Registered Agent

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VENDITA CRIS, LLC
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:

Donald Powell

Name of Person

VENDITA CRIS, LLC

Firm/Company

401 E Jackson St, Suite 3300,

Address

Tampa, FL 33602

City/State and Zip Code

Don.Powell@vendita.com

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

For further information concerning this matter, please call:

Donald Powell at (352) 427-9368
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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3. 05/04/2023 Date of filing/registration in Florida
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301 W. PLATT STREET, #A311
Tampa, FL 33606
- (b) DONALD POWELL
Enter name of NEW Registered Agent and/or NEW Registered Office address:
401 E Jackson St Suite 3300, Tampa
NEW Registered Office Address:
401 E Jackson St Suite 3300,
Tampa, FL 33602

FILED
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[Signature]
Signature of a member or authorized representative of a member

Doug Sullinger
Printed or typed name of signee

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[Signature]
Signature of Registered Agent