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(Requestor's Name)	—		
(Address)			
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(City/State/Zip/Phone #)			
(Business Entity Name)			
(Document Number)			
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SECRETARY OF STALLAHASSEE, FL

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COVER LETTER

TO: **Registration Section** Division of Corporations

SQUIGGLE LLC Name of Limited Liability Company SUBJECT:

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:

Richard Bowser

Firm/Company

2521 Regul Thiver Rd Address

Valvico FL 33596 City/State and Zip Code

<u>Fichardpbower@qmail.com</u> E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

at (_____) _____ Area Code & Daytime Telephone Number

ب

STREET/COURIER ADDRESS: **Registration Section Division of Corporations** Clitton 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

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.

I. Na	me of the limited liability company: <u>CQUIGGL</u>	ELLC
2. (a)	7 (21 Regal River Rd (b) 252	1 Regal River Rd
2. (u)		lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Valv.10, FL]][96 //	alr.co, FL 33596
3.		23000225680 Document number
5. (a)	<u>United</u> <u>States</u> <u>Largeration</u> <u>Mgent</u> , Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	In(
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	S10
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	SECRE TAR
		E R
	Jackfenville	
(b)	Richard P Rowser	2: 38 FI. FI.
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	ι ₁ τη - Ου
	2521 Regal River Rd	
	NEW Registered Office Address:	
	Valvico .FL 37596	
the cha agent v was/we	imited liability company is not organized under the laws of the State of Flo ange or changes are made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited liability company, it is ere authorized by an affirmative vote of the members of the limited liability icles of arganization or the operating agreement of the limited liability com	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in

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Printed or typed name of signee ward

Signature of a member or authorized representative of a member

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.

<u>e</u>l N Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 F1LING FEE: \$25.00