12300252991

(Requestor's Name)							
(Address)							
•							
(Address)							
(Nulless)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Estin Marie)							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



000426516790

03/26/24--01029--012 **25.00



14. HUNT 0426/24

COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	Somerset & Main LLC		
SODULE		lame of Limited	Liability Company
Dear Sir	or Madam:		
The encl	osed Registered Agent/Registered (Office Change an	d fee(s) are submitted for filing.
Please re	turn all correspondence concerning	this matter to the	e following:
Andrew I	Pierce		
	Name of Person		
Cindy's F	lorida LLC		
	Firm/Company		
8051 N. T	Famiami Trail STE E6		
	Address		
Sarasota,	Florida, 34243		
	City/State and Zip Code	2	
reports@	cloudpeaklaw.com		
E-n	mail address: (to be used for future a	innual report not	fication)
For furth	er information concerning this matt	er, please call:	
Andrew I	Pierce	307 at (683-0983
	Name of Person	== (Area Code & Daytime Telephone Number
I I I	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
1	Enclosed is a check for the followi	ng amount:	
í	\$25 Filing Fee	a :	\$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:	n LLC			
2. (a)	8051 N. Tamiami Trail STE E6 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)		Amiling address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Sarasota, Florida, 34243			Sarasota, F	lorida, 34243
	05/23/2023		I	.230002529	91
3. 5. (a)	Date of filing/registration in Florida MARROCCO, THERESA M	4.	_	,	Document number
<i>γ</i> . (u)	Registered Agent and Registered Office shown on the records of 5121 NE 30TH TERRACE	f the Flor	rida I	Dept. of State	- ::
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	LIGHTHOUSE POINT , F	L_33064	ļ		• •
(b)	Cindy's Florida LLC				
	Enter name of NEW Registered Agent and/or NEW Registered Office address: 8051 N. Tamiami Trail STE E6				Cn C
	NEW Registered Office Address:				
	Sarasota , F	 L	3		
change agent w was/we	mited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registe iability of the le limite	erec con imit d lia	l office and npany, it is led liability lbility com	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
Signat	ure of a member or authorized representative of a member	A	ndn	ew Pierce	Printed or typed name of signee
I herel provision the obli to mere notified	by accept the appointment as registered agent and agons of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address, I in writing of this change. The of Registated Agent	ree to de e perfor ed for in hereby	nct i mai n Cl cor	n this capa nce of my d napter 605, nfirm that t	city I further garee to comply with the