

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.

(((H230004365073)))



H230004365073ABC/

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

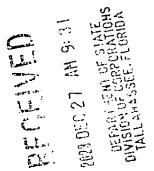
From:

Account Name : INCFILE.COM LLC Account Number : I20220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

\*\*Enter the email address for this business entity to be used for future\_\_\_ annual report mailings. Enter only one email address please.\*\* 5

Email Address:\_\_\_\_

EFILE1234@INCFILE.COM



## LLC REGISTERED AGENT CHANGE CHRISTIAN MILLENNIAL COACHES LLC

Certificate of Status	0
Certified Copy	0
Page Count	0.3
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help **DEC 58 5053** T. LEMIEUX

بب

23

(((H230004365073)))

## **COVER LETTER**

itions		
CHRISTIA	AN MILLEN	NIAL COACHES LLC
Nan	ne of Limite	d Liability Company
ent/Registered Off	ice Change :	and fee(s) are submitted for filing.
ence concerning th	is matter to t	the following:
ne of Person		
n/Company		<del></del>
STF 220		
ddress		
ate and Zip Code		<del></del>
COM		
used for future ann	nual report no	otification)
cerning this matter.	please call:	
	arr 1	) 888-462-3453
rson	\	Area Code & Daytime Telephone Number
on rations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee
2314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
c for the following	amount:	
		1 \$55 Filing Fee & Certified Copy
	CHRISTIA Nar gent/Registered Oftence concerning the me of Person  m/Company  STE 220 ddress  ate and Zip Code  COM used for future and cerning this matter.  Frson  on rations 2314	CHRISTIAN MILLEN Name of Limite gent/Registered Office Change a ence concerning this matter to a m/Company  STE 220 ddress  ate and Zip Code  COM used for future annual report in cerning this matter, please call: at (1

(((H23000436507 3)))

## 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 Stantes, the undersigned limited hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I No	nne of the limited liability company CHRIST	TAN MILLENNIAL COACHES LLC
2. (a)	6421 N. FLORIDA AVE	(b) 6421 N. FLORIDA AVE
	Principal office address of limited hability compa (Note: MUST BE STREET, ADDRESS)	Mathing address of limited liability company.  (Note: MAY BE POST OFFICE BOX)
	SUITE D #1196	SU!TE D #1196
	TAMPA, FL 33604	TAMPA, FL 33604
	05/30/2023	L23000260702
3	Date of filing/registration in Florida	4. Document number
5 (a)	JENNA H SHAFFER	
. (/	Registered Agent and Registered Office shown on the rec	rords of the Florida Dept, of State.
	2311 W NORTH B ST	
	Registered Office Address MUST BE FLORIDA ST	TREET ADDRESS)
	TAMPA	F1 33609
(b)	REPUBLIC REGISTERED AGENT LLC	بي <u>د</u> کې
	Emer name of <u>NEW Registered Agent</u> and/or <u>NEW Reg</u>	gistered Office address:
	1150 Nw 72nd Ave Tower I Ste 455	
	NEW Registered Office Address.	
		<del></del>
	Miami	2011
	ivila(1)1	FL33126
f the li	mited liability company is not organized under i	the laws of the State of Florida, it is hereby confirmed that after the
thange reent w	or changes are made, the Florida street address ill be identical. Or in the ease of a Florida limi	of the registered office and the business office of the registered ited liability company, it is hereby confirmed that the change(s)
vas/we	re authorized by an affirmative vote of the mem	ibers of the limited liability company or as otherwise provided in
ле апіс І	cles of organization or the operating agreement of	
Signati	Javich (A Shapeler are of a member of a me	David A Shaffer  Printed or typed name of signee
Lhereb	V accent the annominent as registered account	nd agree to act in this capacity. I further agree to comply with the applete performance of my duties, and I am familiar with and occept ovided for in Chapter 602, F.S. Or, if this document is being filed ess. I hereby confirm that the limited hability company has been
oufied 70	in writing of this change	The state of the s
<u>'//</u> Signaturi	Lealou Liolern	<del>_</del>
Fourth	Companyared regular	