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.

(((H24000205265 3)))



H240002052653ABC-

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 : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future no sannual report mailings. Enter only one email address please.

Email Address:

Production 12 pp. USF PP. DIVISION CONTRACTOR CONTRACTO

LLC REGISTERED AGENT CHANGE CHRISSYS LOVE FOR MOMMIES LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

JUN 13 2024

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	ame of the limited liability company: Chrissys Love for	Mon	mies LLC	
2. (a)	29 Gold Finch Way			Finch Way
.,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(6)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Crawfordville, FL 32327		Crawfordy	ville, FL 32327
	05/31/2023		1.230002649	963
3. 5. (a)	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	- 4.	***************************************	Document number
1/	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.	the Flo	rida Dept, of Sta	e:
	Registered Office Address (MUST BE FLORIDA STREET)	1DDR	ESS)	- - 12
	Jacksonville, FL	3220	2	1 TALLAN
(b)	Corporate Creations Network Inc.			JUN 12 F
	Enter name of NEW Registered Agent and/or NEW Registered 801 US Highway 1	omo	address:	2024 JUN 12 PM 2: 0 SELENHASSEE, FLORI
	NEW Registered Office Address:	,		- <u>5</u>
	North Palm Beach, FL	33408	}	_
nange gent w vas/we	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	regist bility f the i	ered office and company, it is imited liability	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	Kristen Espinales		•	s, Attorney-in-Fact
Signati	ure of a member or authorized representative of a member	_	 ,	Printed or typed name of signee
he obli o mere	y accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete gations of my position as registered agent as provided ly reflect a change in the registered office address, I h I in writing of this change.	ee to e perfor for the ereby	ict in this cape mance of my c 1 Chapter 605 confirm that i	acity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been

Kristen Espinales, Special Secretary

Kristen Espinales

Signature of Registered Agent