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(Requestor's Name)
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(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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### **COVER LETTER**

**Registration Section** TO: Division of Corporations

## PALM BEACH EV RENTALS LLC

SUBJECT: \_\_\_\_

. .

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:

ANTHONY J MOMMONE

Name of Person

PALM BEACH EV RENTALS LLC

Firm/Company

1422 10TH STREET

Address

LAKE PARK, FL 33403

City/State and Zip Code

accounting@561powersports.com

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

For further information concerning this matter, please call:

PATRICIA MOMMONE	561 632-9637 at ( )
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

#### Enclosed is a check for the following amount:

□ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

# 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>,</i> .		,	Έλ)		
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(		Mailing address of limit (Note: MAYBE PO)	ed liability company:
	1422 10TH STREET		1422 10T	H STREET	
	LAKE PARK, FL 33403		LAKE PA	ARK. FL 33403	
	JUNE 13, 2023		L23000285	\$832	
	Date of filing/registration in Florida	4.		Document number	
(a)					
(a)	Registered Agent and Registered Office shown on the records of	the Florid	ia Dept. of Sta	ite:	
	UNITED STATES CORPORATION AGENTS, INC.				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	55)	_	
	476 RIVERSIDE AVENUE				
			·····		·,
	JACKSONVILLE, F	L		· ·	<u> </u>
					5-10
(b)	Enter name of NEW Registered Agent and/or NEW Registere	<u>.</u>		_	<i>©</i> €
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office a	<u>iddress</u> :		
	ANTHONY J MOMMONE				
	<u> </u>			_ · :	10 23
	<u>NEW</u> Registered Office Address:			r	
	13632 77TH PLACE N			_	
	WEST PALM BEACH, F	L 33412	5.0		
hang	limited liability company is not organized under the la e or changes are made, the Florida street address of th will be identical. Or, in the case of a Florida limited rere authorized by an utilizative vote of the members ticles of organization or the operating agreement of the	regist	fed office a	nd the business offic is hereby confirmed	the registere the registere
		A)		MOMMONE	
Sigo	ature of a member or authorized representative of a member	6	<b>``</b>	Printed or typed nam	e of signee
here rovis	ature of a member or authorized representative of a member environment as registered agent and ag plons of all statutes relative to the proper and complete obligations of any position as registered agent as provide rely reflective change in the registered office address. I ed in Frinngof this change.	ed fr in ly eby	in this ca nance of my Chapter 60 confirm tha	pacity. 1 further agr dutics, and 1 am fa 5, F.S. Or, if this d t the limited liability	ree to comply with miliar with and a ocument is being company has bei
otifie					
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e	hire officerstered Agent				