L23000303250

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(Requestor's Name)
(Address)	
(Address)	
(City/State/Zip/Phor	ne #)
PICK-UP WAIT	MAIL
(Business Entity Na	nme)
(Document Number	r)
Certified Copies Certificate	es of Status
Special Instructions to Filing Officer:	
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OCT 2 --S. PRATHER



August 26, 2024

M&B HOME RESTORATIONS LLC MELODY MULLET 7555 SADDLE CREEK TRAIL SARASOTA, FL 34241

SUBJECT: M&B HOME RESTORATIONS LLC

Ref. Number: L23000303250

We have received your document for M&B HOME RESTORATIONS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Stacy Prather Regulatory Specialist III



Letter Number: 324A00019132

COVER LETTER

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	ation Section n of Corporations		
SUBJECT:	MAB HOME	2 RESTOVO ame of Limited Liab	
		ame of Emilied Elac	onity Company
Dear Sir or Mac	lam:		
The enclosed Re	egistered Agent/Registered O	ffice Change and fe	e(s) are submitted for filing.
Please return all	correspondence concerning	this matter to the fol	Howing:
me 1 <i>00</i>	Name of Person		_
	Firm/Company		_
7555	Saddle Creek T Address	rail	_
Savaso	TA FL 3424 City/State and Zip Code		_
MC100d E-mail add	UtMUILT @ h. dr. dr. future as	OtWail. CC	ation)
For further info	rmation concerning this matte	er, please call:	
Merod	1		441-7246) 373-5370
	Name of Person	\ <u></u> -	Area Code & Daytime Telephone Number
Registr Divisio P.O. B	g Address: ration Section on of Corporations ox 6327 assee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclose	ed is a check for the following	ng amount:	
\$25	Filing Fee	\$ 55	Filing Fee & Certified Copy
INHS18 (2/14)	See front	paper. A	ready paid

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. Name of the limited liability company: M&B Home Restoration	suc
2. (a) 7555 Saddle Creek Trail (b) 7555 Saddle Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE PO	Creex trail ited liability company: OST OFFICE BOX
Sarasota FL 34241 Sarasota FL	34241
	
SCOTCMB4 10 Th 2024 93-20635 73 3. Date of filing/registration in Florida 4. Document number	3
3. Date of filing/registration in Florida 4. Document number	r
5. (a) <u>Republic Registered Agent LLC</u>	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
1150 NW 72nd Tower 1 suite 455	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	2024 Str
, FL	1 9
, · · · ·	·
(b) Melody Mullet	—————————————————————————————————————
Enter name of NEW Registered Agent and/or NEW Registered Office address:	
TEE COLLIN (VORY TICK) COCOSON FI	. '
7555 Saddie Creek Trail Sarasota FL NEW Registered Office Address:	
34241	
771	
, FL	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby change or changes are made, the Florida street address of the registered office and the business offic agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed was/were authorized by an affirmative vote of the members of the limited liability company or as of the articles of organization or the operating agreement of the limited liability company.	ce of the registered that the change(s) therwise provided in
Signature of a member or authorized representative of a member Printed or typed name	
	t total
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agr provisions of all statutes relative to the proper and complete performance of my duties, and I am faithe obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this do to merely reflect a change in the registered office address, I hereby confirm that the limited liability notified in writing of this change.	ee to compty with the miliar with and accept coument is being filed company has been
Milod - Mint	

Signature of Registered Agent