

L23000313210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

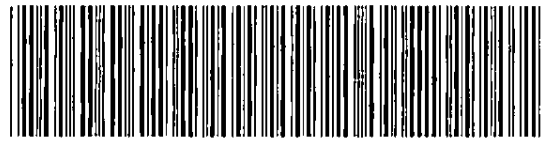
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(Business Entity Name)

(Document Number)

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2023 JUL 13 PM 3:15

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Flex Diversified Services, LLC

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:

**Felix C. Brown**

Name of Person

**Flex Diversified Services, LLC**

Firm/Company

**3510 Silver Lace Lane #45**

Address

**Boynton Beach, FL 33436**

City/State and Zip Code

**brownf1234@gmail.com cc: hickst1215@gmail.com**

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

For further information concerning this matter, please call:

**Felix Brown**

Name of Person

at ( **561** ) **351-1196**

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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

\$25 Filing Fee

\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 18, 2023

FELIX C. BROWN  
3510 SILVER LACE LANE #45  
BOYNTON BEACH, FL 33436 US

SUBJECT: FLEX DIVERSIFIED SERVICES LLC  
Ref. Number: L23000313210

We have received your document for and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham  
Regulatory Specialist III  
Director's Office

Letter Number: 023A00019103

SEP 18 2023

**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.

**Flex Diversified Services, LLC**

1. Name of the limited liability company: \_\_\_\_\_

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_

Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*

Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*

7901 4th St N Ste 15124

7901 4th St N Ste 15124

St. Petersburg, FL 33702

St. Petersburg FL 33702

June 29, 2023

L23000313210

3. Date of filing/registration in Florida

4. Document number

5. (a) Felix C. Brown

2023 JUN 13 PM 3:15

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

3510 Silver Lace Lane #45

Boynton Beach, FL 33436

Registered Agents Inc

(b) \_\_\_\_\_

Enter name of NEW Registered Agent and/or NEW Registered Office address:

7901 4th St N. Ste 300

NEW Registered Office Address:

STE 300

St. Petersburg, FL 33702

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

*Felix C. Brown*

Felix C. Brown

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

*David Roberts*

David Roberts - Assistant Secretary

Signature of Registered Agent