

L 230000330420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

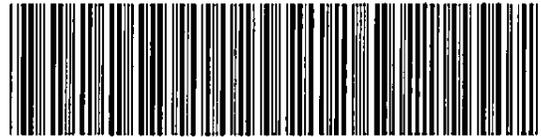
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

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: FLORIDA TRINITY LLC

2. (a) 2355 46TH AVE W APT #15 (b) 2355 46TH AVE W APT #15

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

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

BRADENTON, FL 34207

BRADENTON, FL 34207

07/12/2023

L23000330420

3. Date of filing/registration in Florida 4. Document number

5. (a) GILL, KEVIN

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

2355 46TH AVE W APT #15

Registered Office Address (ST BE FLORIDA STREET ADDRESS)

BRADENTON, FL 34207

(b) ZenBusiness Inc

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

336 E. College Ave, Suite 301

NEW Registered Office Address:

Tallahassee, FL 32301

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DEPARTMENT OF STATE

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.

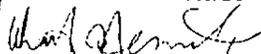
/s/ Kevin Gill

Kevin Gill

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



Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00