## 123000343605

(Requestor's Name)					
(Addre	ess)	<del></del>			
(Address)					
	State/Zip/Phone				
(City/C	otate/Zip/Fitorie	<del>- m</del> )			
PICK-UP	☐ WAIT	MAIL			
(Busin	ess Entity Nan	ne)			
(Docu	ment Number)				
Certified Copies	Certificates	of Status			
Special Instructions to Fili	ing Officer:				

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## COVER LETTER

SUBJECT: SMART RA	NKING SYSTE	<u> </u>	
	Name of Limited	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Regis	tered Office Change an	d fee(s) are submitted for filing.	
Please return all correspondence conc	erning this matter to the	following:	
Michael Serrano			
Name of Pers	son	····	
ZenBusiness Inc.			
Firm/Compar	ny	<u> </u>	: -
336 E. College Ave. Suite 301			7
Address		<del></del>	.,,
Tallahassee, FL 32301			
City/State and Zi	p Code	_	
ra@zenbusiness.com			
E-mail address: (to be used for f	uture annual report not	fication)	
For further information concerning th	is matter, please call:		
Michael Serrano	844 at (	493-6249	
Name of Person		Area Code & Daytime Teleph	none Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, St Tallahassee, FL 32303	uite 810

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

■ \$25 Filing Fee

## 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. N	ame of the limited liability company:SIVIAK	IKA	INKIINC	S SYSTEMS	3 LL	<u> </u>	
2. (a)	2933 CLAIRE LANE	(	b)	COURT SOUTH			
<b></b> . ( <b></b> )	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of l		-	
	Jacksonville, FL 32223	<del>-</del>	<del></del>	Birmingham, A	AL 3520	)5	
	07-20-2023	_	1.23000343	605			
3.	Date of filing/registration in Florida	4.		Document num	ber		
5. (a)	ABBOUD, YUSEF						
υ. (α)	Registered Office Address (MUST BE FLORIDA STREET ADDR	ESS)		_			
	2933 CLAIRE LANE						
	Registered Office Address (ST BE FLORIDA STREET ADDRESS	_	:	2023			
	JACKSONVILLE , FL_	3222	3	<u> </u>	:.	2023 OCT 1	- 17 PP
(b)	ZenBusiness Inc			_	;,-	10 PH	•
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office a	ddress:			<u></u> بب	- 4 4 }
	336 E. College Ave. Suite 301			_		: 52	
	NEW Registered Office Address:						
	Tallahassee , FL	32.	301	_			
change agent was/w	limited liability company is not organized under the laws e or changes are made, the Florida street address of the r will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	egister oility c the lir	red office ar ompany, it i nited liabili	nd the business of is hereby confirm ty company or as	fice of ed that	the regi	stered nge(s)
	/ Yusef Abboud			Yusef Abbou	nd		
Signa	ature of a member or authorized representative of a member			Printed or typed na	ame of si	gnee	
I here provis the ob to mer notifie	by accept the appointment as registered agent and agre- tions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I he d in	e to ac erforn for in ereby c	t in this cap vance of my Chapter 60. onfirm that	oacity. I further a duties, and I am 5, F.S. Or, if this the limited liabil	igree to familia docum ity com	comply or with a nent is be opany ha	with the nd accept ging filed as been
Signati	ure of Registered Agent						

. . . . .