Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000386718 3)))



H240003867183ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

***Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email	Address:			

LLC REGISTERED AGENT CHANGE **2RENDERS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

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. No	ame of the limited liability company: 2RENDEF	RS LLC				
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 300	7901	4th St N STE 300			
	St. Petersburg, FL 33702	St. Per	tersburg, FL 33702			
	08/01/23	L230	00362298			
3.	Date of filing/registration in Florida	4.	Document number			
5. (a)	CASTILLOS, MARIA VICTORIA					
J. (4)	Registered Agent and Registered Office shown on the records of th	e Florida Dept. of S	tate:			
	1132 SLEEPY OAK DR					
	Registered Ottice Address (MUST BE FLORIDA STREET AL	ODRESS)				
	WESLEY CHAPEL FI 3	33543				
			APPRO AHI FILE 2024 NOV 21			
(b) Northwest Registered Agent LLC						
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office address:	No FAR			
	7901 4th St N		- RED LED			
	NEW Registered Office Address:		ن بن الم			
	STE 300	144-74-74-8	_ %.06			
	Ct. Dotoubleum	20200				
	St. Petersburg, FL 3	33702				
the cha agent v was/we	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	he registered off pility company, i the limited liabi	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in			
	North Burning	Nat Smith	1			
•	ture of a member or authorized representative of a member		Printed or typed name of signce			
provisi the obl to meri notified	by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I he d in writing of this change.	erformance of m for in Chapter 6 creby confirm the	apacity. I further agree to comply with the by duties, and I am familiar with and accept US, F.S. Or, if this document is being filed at the limited liability company has been			
r- /V~	Taylor Newman - Assistant	Secretary				

Signature of Registered Agent