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(Requestor's Name)								
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COVER LETTER

_	istration Section sion of Corporations							
SUBJECT:	Reids Wash & Revival LLC							
	Name of Limited Liability Company							
Dear Sir or I	Madam:							
The enclosed	d Registered Agent/Registered	Office Chan	ge and	fee(s) are submitted for filing.				
Please return	all correspondence concerning	g this matter	to the	following:				
Jennifer Knu	dson							
	Name of Person							
Accounting I	By the Bay Inc							
	Firm/Company			_				
2208 W High	nway 390							
	Address							
Lynn Haven,	FL 32444							
-11-	City/State and Zip Coc	le						
jen@account	ingbythebay.com							
E-mail	address: (to be used for future	annual repoi	rt notif	cation)				
For further i	nformation concerning this mat	iter, please c	all:					
Brandon Rei	Ł	85 at (50	819-3334				
	Name of Person	\		Area Code & Daytime Telephone Number				
Reg Div P.O	iling Address: distration Section dision of Corporations dispersion Box 6327 dispersion Box 6327 dispersion Box 6324			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enc	losed is a check for the follow	ing amount	:					
z s	25 Filing Fee		□ \$:	55 Filing Fee & Certified Copy				

INHS18 (2/14)

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. Na	me of the limited liability company: Reids Wash & Re	evival LLC							
2. (a)	5306 Soule Dr Panama City, FL 32404	(b)	5306 Soule Dr Panama City, FL 32404						
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Maiti	ing address of limited liabil tote: MAY BE POST OFF					
3.	08/11/2023 Date of filing/registration in Florida		23000377818	cument number					
	Jennifer Rich	Ⴏ.	1000	cument number					
5. (a)	Registered Agent and Registered Office shown on the records of 5306 Soule Dr Registered Office Address (MUST BE FLORIDA STREET)		Dept. of State:	ĨĂĬ.	202				
	Panama City , FL	32404	. <u> </u>	TALLAHASSEE,	2024 JUL 22	T:			
(b)	Jennifer Knudson			mc.					
(0)	Enter name of NEW Registered Agent and/or NEW Registered		<u>'ess</u> ;	E, FLORIDI	PH 4: 28	الوميية			
	2208 W Highway 390			NDA NE	28				
	NEW Registered Office Address:								
	Lynn Haven, FL	32444							
change agent v was/we the arti Signa	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law of a member or authorized representative of a member	registered ability con of the limit limited lia	office and the spany, it is here ed liability company bility company of the property of the pr	e business office of the reby confirmed that the ompany or as otherwise by. TCLL dinted or typed name of signal and of signal a	e register le change e provide	red e(s) ed in			
provisi the obl to mere	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I id in writing of this change.	ee to act i performa d for in Cl hereby cor	n this capacity ice of my duti apter 605, F., firm that the i	y. I further agree to co es, and I am familiar v S. Or, if this documen limited liability compa	Omply wi with and at is being any has b	th the accept g filed wen			
Sjanatu	re of Registered Agent								

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