## L23000461756

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(Cif	ty/State/Zip/Phone	e #)
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## COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Coffee and A Shine 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:			
Jenny R. Coffee. Name of Person	<del></del>			
Cleaning Company Firm/Company	<del></del>			
5050 1971 St N#3 Address				
St. Peteroburo, Fl 33709 City/State and Zip Code	) <u>.                                    </u>			
E-mail address: (to be used for future annual report	notification)			
For further information concerning this matter, please call:				
Jenny R. Coffee at 9	Area Code & Daytime Telephone Number			
Mailing Address:	Street Address:			
Registration Section	Registration Section			
Division of Corporations P.O. Box 6327	Division of Corporations			
Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a check for the following amount:				
□ \$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. N	ame of the limited liability company: Coffee And A	Shine
2 (a)	5050 LATH STN#3 (b)	
z. (u)		Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BOX)
	St. Letersburg, f1 33709	
	<del></del>	
	10-11-2023	
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	Zen Business	
J. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat	- e:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	, FL	_
21.5	January R. Caffee	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
		··' <del>-</del> ·
	5050 LATH St. N#3	· · · · · · · · · · · · · · · · · · ·
	NEW Registered Office Address:	•
	St reters burg +1 33709	
	FL	
70.1		
ti the li	mited liability company is not organized under the laws of the State of Flo or changes are made, the Florida street address of the registered office and	rida, it is hereby confirmed that after the
agent v	viii be identical. Or, in the case of a Florida limited liability company, it is	hereby confirmed that the change(s)
the arti	ere authorized by an affirmative vote of the members of the limited liability cles of organization or the operating agreement of the limited liability com	company or as otherwise provided in pany.
32 n	must Cathoo Jennik	Coffee.
/\$ignat	ure of member or authorized representative of a member	Printed or typed name of signee
theret provisi	by accept the appointment as registered agent and agree to act in this capa	city. I further agree to comply with the
the obli	ons of all statutes relative to the proper and complete performance of my a igations of my position as registered agent as provided for in Chapter 605, by reflect a change in the registered office address. I hereby confirm that the property of this change	F.S. Or, if this document is being filed
notifiea	its rejuct a change in the registered office address, I hereby confirm that the surfling of this change.	ne umited liability company has been
M	yt Cotree	
Signatui	e of registered Agant	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00