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(Requestor's Name)
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COVER LETTER

Division of Corporations				
AP EQUITY HOLDINGS LLC SUBJECT:				
	imited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.			
Please return all correspondence concerning this matt	er to the following:			
MELODY FAGHIH	•			
Name of Person				
AP EQUITY HOLDINGS LLC				
Firm/Company				
25352 WESLEY CHAPEL BLVD				
Address				
LUTZ FL 33559	ı			
City/State and Zip Code				
JENNIFER@CFOSOURCES.COM				
E-mail address: (to be used for future annual rep	port notification)			
For further information concerning this matter, please	call:			
	813 920-2300			
Name of Person	Area Code & Daytime Telephone Number			
Mailing Address:	Street Address:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a check for the following amou	nt:			
■ \$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: AP EQUITY H	IOLDINGS	LLC			
			b)			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of		ompany:
	25352 WESLEY CHAPEL BLVD		25352 WE	SLEY CHAPEL	BLVD	
	LUTZ FL 33559		LUTZ FL	33559		
	11/07/2023		L230005055	665		
3.	Date of filing/registration in Florida	4.	······································	Document num	nber	
5. (a)	MELODY FAGHIH					
J. (4)	Registered Agent and Registered Office shown on the records	of the Florid	a Dept. of State	- e:	2024 APR	
	Registered Office Address (MUST BE FLORIDA STREE	TADDRES	<u></u>	w	APF	H
	25352 WESLEY CHAPEL BLVD				? 29	750
	LUTZ	FL_33559		-	P	M
(b)	CFO SOURCES LLC				6: 5 I	(and
(-)	Enter name of NEW Registered Agent and/or NEW Register	red Office a	ddress:	-		
	NEW Registered Office Address:			-		
	17862 HUNTING BOW CIR STE 101		<u>.</u>	-		
	LUTZ ,,	FL		-		
change agent v was/we the arti	imited liability company is not organized under the less or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the WINTAM YELLOW	he register liability co s of the lin	ed office and ompany, it is nited liability liability com	I the business of hereby confirm or as	ffice of the reg ned that the ch s otherwise pro	gistered ange(s)
Signa	ture of a member deauthorized representative of a member	-		Printed or typedy	ame of signee	
I here provisi the obj to mey	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provic ely reflect a change in the registered office address, a in parting of this change.	ie perform ded for in s	ance of my d Chapter 605.	luties, and I am .F.S. Or. if this	familiar with s document is	and accept being filed

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