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(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Linky Hame)
(Document Number)
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COVER LETTER

TO: Registration Section Division of Corporations						
Ole Mediterranean Cuisine LLC SUBJECT:						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter	to the following:					
Steven A. Ramunni						
Name of Person						
Steven A. Ramunni. P.A.						
Firm/Company						
110 N. Main Street						
Address						
LaBelle, FL 33935						
City/State and Zip Code	-					
Debbie@sramunnipa.com						
E-mail address: (to be used for future annual repor	t notification)					
For further information concerning this matter, please ca	all:					
Steven A. Ramunni 86	3 230-2268					
Name of Person	Area Code & Daytime Telephone 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, Suite 810 Tallahassee, FL 32303					
Enclosed is a check for the following amount:						
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					

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.

(3)	12377 S Cleveland Ave, 3B, Fort Myers, FL 33907		, L. 1 - 2 , 7 3	Cleveland Ave, 3B, Fort Myers, FL 33907	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(b) <u></u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	12377 S Cleveland Ave, 3B		12377 S	Cleveland Ave. 3B	
	Fort Myers, FL 33907		Fort Myers, FL 33907		
	11/08/2023		L2300050	7639	
3.	Date of filing/registration in Florida	- 4.		Document number	
· (a)	Money Fast Tax Services Inc				
5. (a)	Registered Agent and Registered Office shown on the records of	the Flor	da Dept. of Si	tate:	
	5027 Sw 127th Pl, Miami, FL 33175			. 2	
	Registered Office Address (MUST BE FLORIDA STREET)	1DDRE	SS)	24 DEC	
	5027 Sw 127th Pl				
	Miami . FL	33175		- Pi	
(h)	Steven A. Ramunni, P.A.				
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office :	address:	一	
	110 N. Main Street, LaBelle, FL 33935			<i>*</i>	
	NEW Registered Office Address:			<u> </u>	
	110 N. Main Street				
	LaBelle	33935			
:hange igent w vas/we	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liar re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe ability of the li limited	red office a company, it mited liabil	and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.	
Signat	ure of a member or authorized representative of a member			Printed or typed name of signee	
l hereb provisil he obli	or accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I h	ee to a perfori l for in	ct in this ca nance of m Chapter 60	pacity. I further agree to comply with the violates, and I am familiar with and accept 05, F.S. Or, if this document is being filed	