123000	512722
(Requestor's Name) (Address)	000420790200
(City/State/Zip/Phone #)	12/27/2301017019 *+ 25.80
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	FILED 2023 DEC 27 PH 5: 51 PECLEWRY OF STATE TAILLAMASSEE, FL
Office Use Only	

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ		une of Limited Lia	bility Company
Dear S	Sir or Madam:		
The er	closed Registered Agent/Registered Of	ffice Change and fo	cc(s) are submitted for filing.
Please	return all correspondence concerning t	his matter to the fo	ollowing:
Kaitly	n Forbes		
	Name of Person		_
Compl	ete Cities Planning Group		
	Firm/Company		_
200 S .	Andrews Ave. Ste 504		
	Address		_
Fort La	uderdale, FL 33301		
	City/State and Zip Code		_
-	@completecities.net		
[E-mail address: (to be used for future an	nual report notific	ation)
For fu	rther information concerning this matte	r, please call:	
Kaitlyr	n Forbes	954 at (372-6767
	Name of Person	,	Area Code & Daytime Telephone Number
	<u>Mailing Address:</u> 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:

S25 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.

(a)	200 S. Andrews Ave. Ste 504 Ft. Lauderdale, FL 33301		(b) 200 S.	Andrews Ave. Ste 504 Ft. Lauderdale, FL 33301
. ,	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)			Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BOX</u>)
	11/13/2023			512722
	Date of filing/registration in Florida	4.		Document number
(a)	Kaitlyn Forbes			
	Registered Agent and Registered Office shown on the records	of the Flori	ida Dept. of	State: 27
	Registered Office Address (MUST BE FLORIDA STREE 200 S. Andrews Ave. Ste 504	ET ADDRE.	<u>SS)</u>	PH S
	200 S. Andrews Ave. Ste 504	ET ADDRE. FL	<u>SS)</u>	
(b)	200 S. Andrews Ave. Ste 504	13301	<u>\$\$\$</u>	PH S
(b)	200 S. Andrews Ave. Ste 504 Fort Lauderdale	FL <u>33301</u>		(address change only. see below)
(b)	200 S. Andrews Ave. Ste 504 Fort Lauderdale Kaitlyn Forbes	FL <u>33301</u>		(address change only. see below)
(b)	200 S. Andrews Ave. Ste 504 Fort Lauderdale Kaitlyn Forbes Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registe</u>	FL <u>33301</u>		PH 5:5

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Kaitlyn Forbes

Signature of a member or authorized representative of a member-

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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