

L23000515410

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

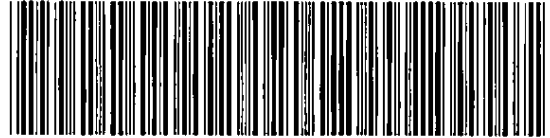
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wmills

Office Use Only



800429325438

05/13/24--01037--009 **25.00

FILED
2024 MAY 13 AM 7:46
SFO
FILING OFFICE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pagliari Wellness LLC
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:

Matthew Stevens

Name of Person

Firm/Company

Address

City/State and Zip Code

mstevens@providerlegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Stevens 714 280-7097

Name of Person at () 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.

1. Name of the limited liability company: Pagliari Wellness LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

35111 US Hwy 19 N, Suite 301

35111 US Hwy 19 N, Suite 301

Palm Harbor, FL 34684

Palm Harbor, FL 34684

11/14/2023

L23000515410

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Verushcka Pagliari

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

201 Lagoon Drive

Palm Harbor, FL 34683

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Verushcka Pagliari

NEW Registered Office Address:

35111 US Hwy 19 N, Suite 301

Palm Harbor, FL 34684

FILED
2024 MAY 13 AM 7:46
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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.

Verushcka Pagliari

Verushcka Pagliari

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.

Verushcka Pagliari

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

Signature Certificate

Reference number: GN6UK-RIB8C-8HP8D-VPWNJ

Signer

Timestamp

Signature

Verushcka Pagliari

Email: verushcka.pagliari@gamedaymenshealth.com

Sent:

07 May 2024 22:42:08 UTC

Viewed:

08 May 2024 12:13:33 UTC

Signed:

08 May 2024 12:14:56 UTC

Verushcka Pagliari

Recipient Verification:

✓ Email verified

08 May 2024 12:13:33 UTC

IP address: 35.140.157.102

Location: Palm Harbor, United States

Document completed by all parties on:

08 May 2024 12:14:56 UTC

- Page 1 of 1



Signed with PandaDoc

PandaDoc is a document workflow and certified eSignature solution trusted by 50,000+ companies worldwide.

