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To: 18506176383

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Division of Corporations

## Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Fax: 8134365206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Fmail	Address:			

## LLC REGISTERED AGENT CHANGE ATLANTIC 9365 FL LLC

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K. SALY

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## 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. Na	nne of the limited liability company:	L LLC		
2. (a)	5.1 Pt-Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  5. 1	_ (1	b)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
•	· !> : 12/04/23	_	L23000537	842
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	REGISTERED AGENTS INC		-1 4 5 4 7 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
	Registered Agent and Registered Office shown on the records of 7901 4TH ST NSUITE 300	the Florid	a Dept. of Sta	e:
	Registered Office Address [MUST BE FLORIDA STREET A	温温 丁		
1141	ST PETERSBURG	33702		THE HELL THE TO THE TENT OF TH
41.5	Northwest Registered Agent LLC			Will be the second of the seco
(b)	Enter name of NEW Registered Agent and/or NEW Registered			
r l la r	7901:4th St N			25 M F. 16
	NEW'Registered Office Address:			_
	STE 300			_
	St. Petersburg, FL	33702		_
the cha agent v was/we	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liter authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regi ability c of the lin	istered offic ompany, it nited liabili	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	ture of a member or authorized representative of a member	Nat	Smith	
-				Printed or typed name of signee
provisi the obl to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I is din writing of this change.  Taylor Newman - Assistant Signary	perform d for in hereby c	et in this cap nance of my Chapter 60, confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signatu	Taylor Newman - Assistant Sore of Registered Agent	,		

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