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COVER LETTER 🗻

Division of Corporations		
LEAO RENOVATIONS LLC		
	nited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Chan	nge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Adam Saulters		
Name of Person		
ZenBusiness Inc.		
Firm/Company		
336 E. College Ave. Suite 301		
Address		
Tallahassee, FL 32301		
City/State and Zip Code		
ra@zenbusiness.com		
E-mail address: (to be used for future annual repo	rt notification)	
For further information concerning this matter, please c	call:	
Adam Saulters 8 at (44 493-6249	
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 amount	t:	
■ \$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	fame of the limited liability company: LEAO RENOVA	ATIONS	LI	LLC	
2. (a)	20900 NE 30TH AVE		(b)	(b) 20900 NE 30TH AVE	
(-2	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(=)	Mailing address of limited liability compar (Note: MAY BE POST OFFICE BOX	•
	8TH FLOOR			8TH FLOOR	
	AVENTURA, FL 33180			AVENTURA, FL 33180	
	12/19/2023		1	1.23000557663	
3.	Date of filing/registration in Florida	4.	-	Document number	
5. (a	MARATHAS, JEFFREY P				
<i>3.</i> (u	Registered Agent and Registered Office shown on the records of 20900 NE 30TH AVE Registered Office Address (MUST BE FLORIDA STREET)			<u> </u>	
	8TH FLOOR				
	AVENTURA, FL 33180 , F	L			
(b)	ZenBusiness Inc			2	て
	Enter name of NEW Registered Agent and/or NEW Registere	d Office:	add	ddress:	F
	336 E. College Ave. Suite 301			20 P	FILED
	NEW Registered Office Address:			3: 35 FIGURE	
	Tallahassee, Fl	L_32301			
chang agent was/w the an	limited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the S/ Tiago Miranda de Leao	ws of the register is ability of the limited	ne Serec con imi d lia	red office and the business office of the register ompany, it is hereby confirmed that the change nited liability company or as otherwise provide	ed (s)
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee	
provis the ob to me	eby accept the appointment as registered agent and age ions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address. I din writing of this change.	ree to a perform ed for in hereby	ect i mai (C) (C)	t in this capacity. I further agree to comply with ance of my duties, and I am familiar with and a Chapter 605, F.S. Or, if this document is being confirm that the limited liability company has be	h the accept filed en
Signat	ure of Registered Agent				