124000001033

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: APFL Holdings LLC	
Name of L Dear Sir or Madam:	imited Liability Company
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Anthony Preza Name of Person	
Firm/Company	
3330 NE 190th Street Unit 2111 Address	
Aventura FL 33180 City/State and Zip Code	
Anthony@parkplusparking.com E-mail address: (to be used for future annual re	eport notification)
For further information concerning this matter, pleas	e call:
Anthony Preza at Name of Person	(347) 582-0494 Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amo	unt:
\$25 Filing Fee	S55 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 submits the following statement in order to change its reg Florida. APFL Holding	istered office or registered agent, or both, in the State of
Name of the Limited Liability Company:	30 EEO
2. (a) 3330 NE 190th Street	(b) 4069 Victory Blvd
Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note. MAY BE POST OFFICE BOX)
Unit 2111	Staten Island NY 10314
Aventura FL 33180	
12/28/2023	L24000001033
3. Date of filing/registration in Florida	4. Document number
5. (a) Capitol Corporate Services, Inc Registered Agent and Registered Office shown on the records of the seconds of the second of the	he Florida Dept, of State:
Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)
515 East Park Avenue 2nd FI	
<u>Tallahassee</u>	<i>32301</i>
(b) Anthony Preza	Office address.
Enter name of NEW Registered Agent and/or NEW Registered	
3330 NE 190th Street	——————————————————————————————————————
NEW Registered Office Address:	ධ
<u>Unit 2111</u>	· · · · · · · · · · · · · · · · · · ·
Aventura	33180
If the limited liability company is not organized under the lay the change or changes are made, the Florida street address of agent will be identical. Or, in the case of a Florida limited his was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the	the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) if the limited liability company or as otherwise provided in limited liability company.
Signature of a member or authorized representative of a member	Anthony Preza Printed or typed name of signee
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provided to merely reflect a change in the registered office address. I)	ee to act in this capacity. I further agree to comply with the

Anthony Preza