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Roberto's Landscaping LLC 5555 Hennessy St North Port, FL 34291 (941) 623-7774 Robertoslandscaping5@yahoo.com

May 1st, 2024

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Sir/Ma'am,

Roberto's Landscaping has moved to 5555 Hennessy St, North Port FL 34291 (from 248 Torrington St, Port Charlotte, FL 33954), and is now correctly listed in your files/sunbiz.org. As the MGMR, I have moved to that location as well (5555 Hennessy St, North Port, FL 34291) but could not find the form on your website to make that change – ergo this letter.

I have included the change form for the Registered Agent (Shawn Hernandez) change of address as well as the \$25.00 fee.

If either this letter or the form are not sufficient for the address change for both the MGMR and/or the Registered Agent please let me know via email at robertoslandscaping5@yahoo.com.

Sincerely,

Thom

Roberto Hernandez

MGMR, Roberto's Landscaping LLC

3 encl

- 1. Form INHS18 (2/14) with Cover Letter
- 2. \$25 Check
- 3. Sunbiz.org printout of Roberto's Landscaping LLC "Detail by Entity Name"

COVER LETTER

	gistration Section vision of Corporations	
SUBJECT	Roberto's Landscaping LLC	
	Name of L	imited Liability Company
Dear Sir or	Madam:	
The enclose	ed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matt	er to the following:
Shawn Hern	nandez	
	Name of Person	
Robert	65 Landscaping LLC Firm/Company	
5555 Henne	essy St	
	Address	· · · · · · · · · · · · · · · · · · ·
North Port,	FL 34291	
	City/State and Zip Code	
robertosland	dscaping5@yahoo.com	
E-ma	il address: (to be used for future annual rep	port notification)
For further	information concerning this matter, please	e call:
Roberto Hei	rnandez at (941.623.7774
_	Name of Person	Area Code & Daytime Telephone Number
Re Di P.(ailing Address: egistration Section vision of Corporations O. Box 6327 dlahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
En	closed is a check for the following amou	nt:
X	\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

INH\$18 (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.

Νŧ	me of the limited liability company:		LC					
(a)			(b)					
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		. , _		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) nessy St			
	5555 Hennessy St		5	555 Henn				
	North Port, FL 34291		<u> </u>	North Port, FL 34291				
	12/26/2023/effective date 01/01/2024		L2	40000027	51			
	Date of filing/registration in Florida	4.			Document	number		
(a)	Shawn Hernandez							
;	Registered Agent and Registered Office shown on the records of 248 Torrington St, Port Charlotte, FL 33954	f the Flo	rida D	ept, of State	- ::			
lau) Registered Office Address (MUST BE FLORIDA STREET) 5555 Hennessy St	<u>"ADDRI</u>	ESS)		-			
	North Port , F	L	!		-	SEC	2024 1	
(b) <u>.</u>	Enter name of NEW Registered Agent and/or NEW Registered Office address:			<u>'88;</u>	-	SECTIONS WIN	2024 MAY -9 AM 9:	
	NEW Registered Office Address:			,	-		ે. તે	
	5555 Hennessy St				-	3,44	_	
	North Port , F	L 34291						
	imited liability company is not organized under the la or changes are made, the Florida street address of the	e regist	ered	office and pany, it is	f the busine hereby cor	ess office nfirmed th	of the i	registered change(s)
nt v /w/	will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the l e limite	d liab		pany.	or as ouic		provided

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