## L7400001274S

(Re	equestor's Name)				
(Address)					
(Äddress)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	rsiness Entity Nar	ne)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
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Office Use Only



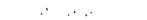
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## **COVER LETTER**

	Registration Section Division of Corporations				
SUBJE	MOBLEY PRODUCTIONS EL	.C			
SODJE	Name of Limited Liability Company				
Dear Si	r or Madam:				
The enc	losed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.		
Please r	eturn all correspondence concernin	g this matter to the	following:		
Camero	n Biddy				
	Name of Person	100			
ZenBus	iness Inc.				
	Firm/Company				
336 E. C	College Ave. Suite 301		-(*) -: 		
	Address		<del></del>		
Tallahas	ssee, FL 32301				
	City/State and Zip Co	de			
ra@zer	business.com				
E-	mail address: (to be used for future	annual report notif	ication)		
For furt	her information concerning this ma	tter, please call:			
Camero	n Biddy	844 at (	493-6249		
	Name of Person		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 follow	ving amount:			
	☐ \$25 Filing Fee	<b>□</b> \$	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.

2. (a		,	(2/0/24	
(		( )	b)	RDNER DRIVE
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (	<u></u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	LAKELAND, FL 33813	_	LAKELA	ND, FL 33813
	01/04/2024	_	L2400001	2745
<ol> <li>3.</li> <li>5. (a)</li> </ol>	Date of filing/registration in Florida  MOBLEY JOSHUA	4.		Document number
J. (	Registered Agent and Registered Office shown on the records of the 6368 GARDNER DRIVE	ne Florid	a Dept. of Sta	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			ANZE FEB
	LAKELAND, FL	33813		- · · · · · · · · · · · · · · · · · · ·
(b	ZenBusiness Inc.			
γ.	Enter name of NEW Registered Agent and/or NEW Registered Office address:			00
	336 E. College Ave.			
	NEW Registered Office Address:			_
	Suite 301			_
	Tallahassee FL_	32301		_
chan agen was/ the a	limited liability company is not organized under the law ge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the I Joshua Mobley	register bility co f the lin imited	ed office ar ompany, it i nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	nature of a member or authorized representative of a member			Printed or typed name of signee
I her proving the or notif	why accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address, I have all informations of this change.	re to ac perform for in ( ereby c	t in this cap ance of my Chapter 60, onfirm that	anita I forthan armae to assembly with the