## 240000/4017

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Catherine Cares, 1	<u>L</u> C
Name of Limited Lial	omity Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fe	e(s) are submitted for filing.
Please return all correspondence concerning this matter to the fo	llowing:
Catherine Pondexter Name of Person	_
Catherine Cares, LLC Firm/Company	<u>.</u>
8428 Monte Lane	_
Tallahasset FL 32309 City/State and Zip Code	2
E-mail address: (to be used for future annual report notific.	ation)
For further information concerning this matter, please call:	
Catherine Pordexter at (85) Name of Person	591-0311 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
Englosed is a check for the following amount:	

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

## 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.

I. Na	ame of the limited liability company: Lathernie Caves, LLC	
2. (a)	0400 M Jolan Tellerity 0400 11 Jolan Teller	isse F
	(Note: MUST BE STREET ADDRESS) 37-305 (Note: MAY BE POST OFFICE BOX)	7230
	1/4/2024 224000014017	
<ul><li>3.</li><li>5. (a)</li></ul>	Designand Assert and Designand Office shows on the second of the Florida Days of States	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	FL Da la deserta	
(b)	Tanarck Vanuver, Registered Agent Agent Enter name of NEW Registered Office address:  8428 Monte Lane Tallahasser #132:305  NEW Registered Office Address:	
	NEW Registered Office Address:	
change agent v was/we the arti	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the se or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in ticles of organization or the operating agreement of the limited liability company.  All was affirmed that after the limited business office of the registered will be identical. Or, in the case of a Florida limited liability company or as otherwise provided in ticles of organization or the operating agreement of the limited liability company.  All was affirmed that after the limited liability company or as otherwise provided in ticles of organization or the operating agreement of the limited liability company.  All was affirmed that after the limited liability company or as otherwise provided in ticles of organization or the operating agreement of the limited liability company.  All was affirmed that after the limited liability company or as otherwise provided in ticles of organization or the operating agreement of the limited liability company.  All was affirmed that after the limited liability company or as otherwise provided in ticles of organization or the operating agreement of the limited liability company.  All was affirmed to the limited liability company or as otherwise provided in the limited liability company.	49
I	Signature of new registered agent, if applicable: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.	V
~	(Registered agent accepting appointment)  (Registered agent accepting appointment)	