

124 0000 27213

114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300423419633

02/09/24--01002--016 **25.00

FILED
2024 FEB -9 PM 4:24
CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Little
LITTLE HOPPERS PLAYROOM LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EMANUEL GRANDBERRY

Name of Person

LITTLE HOPPERS PLAYROOM

Firm/Company

1204 BLACK KNIGHT DR

Address

VALRICO, FL 33594

City/State and Zip Code

EASY.EG75@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EMANUEL GRANDBERRY

at (813)

403-3920

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 following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

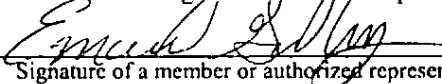
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

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. Name of the limited liability company: LITTLE HOPPERS PLAYROOM
2. (a) 1204 BLACK KNIGHT DR
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
VALRICO, FL. 33594
- (b) 1204 BLACK KNIGH DR
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
VALRICO, FL 33594
3. 01/12/2024 Date of filing/registration in Florida
4. L24000027213 Document number
5. (a) ZENBUSINESS INC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
336 E COLLEGE AVE
Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**
SUITE 301
TALLAHASSEE, FL 32301
- (b) EMANUEL GRANDBERRY
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
NEW Registered Office Address:
1204 BLACK KNIGHT DR
VALRICO, FL 33594

FILED
2024 FEB - 9 PM 4:24
CLERK OF STATE
TALLAHASSEE, FL


If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


Signature of a member or authorized representative of a member

EMANUEL GRANDBERRY

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the 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