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11/25/24--01012--014 **25.00



COVER LETTER

TO: Registration Section Division of Corporations

ROTISSERIG JUPITER LOUNCO Name of Limited Liability Company LU SUBJECT:

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:

CHAISTOPHER JAUEN Name of Person

Firm/Company

835 1374 571467 Address

AUG PARK KUP 33403 City/State and Zip Code

dress: (To be used for future annual report notification) 115

For further information concerning this matter, please call:

<u>CHAUSTOPHEA</u> <u>FAUGUAL</u> <u>561</u>, <u>313-6837</u> 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

S55 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.

. and of the mining a more	ity company: 267	-1554212	JUPIZAL	HOLD TO L
a)		(b)		
Principal office add	ress of limited hability company: <u>T BE STREET ADDRESS</u>)		Mailing address of limited (<u>Note: MAY BE POS</u>	
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	<u>26.2</u> Ψ registration in Florida	<u></u>	- 24 0000 Document number	33350
a)	stered Office shown on the record:	and the state of the Darse and St		
	COPPORAZ			
Registered Office Address	(MUST BE FLORIDA STRE	TT ADDRESS		SE 1024
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		FL 32301	*	25
TAMAMAS	<u> </u>	FL <u><u><u></u></u><u></u><u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u></u></u>		PH .
» CHAISTO	PHER SAUL			F ST 2:
	tered Agent and or NEW Registe			1.56
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NEW Danis and DOGLA				
<u>NEW</u> Registered Office A	37H 5714E7			
835	5 (H) (1172/			
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			2	
Elimited liability compan- ge or changes are made.	iv is not organized under the the Florida street address of	the registered office a	florida, it is hereby cou and the business office	of the registered
Contraction and the state	the case of a Florida limited	d liability company, it	is hereby confirmed the	hat the change(s)
while be identical. Or, in				Province Province of the second
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were authorized by an all rticles of organization or mure of a member of admini- rehy accept the appointm	the overating agreement of	<u>CHU</u> agree to act in this ca	<u><u>270</u></u> <u>Printed or typed name of</u> <u>Printed or typed name of</u> <u>printed or typed name of</u>	e to comply with the

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00

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