

L24000087859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

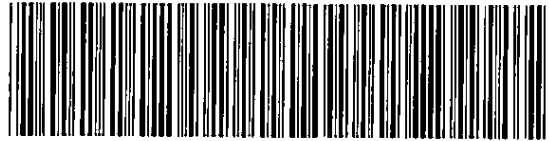
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 JUN 11 AM 8:45

CLERK OF STATE
TALLAHASSEE, FLORIDA



May 28, 2024

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Change in registered agent address

To Whom It May Concern:

Please find enclosed a statement of change of registered office for a LLC. A check in the amount of \$25 is included.

Upon filing, please send the filed copy to my attention either via email at rhanson@quikfilings.com or to the address shown below.

If you have any questions, please contact me at 269-743-4201.

Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Rebecca Hanson". The signature is fluid and cursive, with a long, sweeping underline.

Rebecca Hanson
President
rhanson@quikfilings.com

**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: SHADESOLUTIONS CONSULTING LLC

2. (a) <u>Principal office address of limited liability company:</u> <u>(Note: MUST BE STREET ADDRESS)</u> 33164 Whisper Pointe Dr Wesley Chapel, FL 33545	(b) <u>Mailing address of limited liability company:</u> <u>(Note: MAY BE POST OFFICE BOX)</u> 33164 Whisper Pointe Dr Wesley Chapel, FL 33545
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3. <u>02/19/2024</u> Date of filing/registration in Florida	4. <u>1.24000087859</u> Document number
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5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Summer Gilbert
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
34475 Daisy Meadow Loop
Zephyrhills, FL 33541

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
33164 Whisper Pointe Drive
Wesley Chapel, FL 33545

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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.

Summer Gilbert
Signature of a member or authorized representative of a member

Summer Gilbert
Printed or typed name of signer

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.

Summer Gilbert
Signature of Registered Agent