24000127 9

(Re	- questor's Name)					
(Address)						
(Address)						
(City	y/State/Zip/Phon	e #)				
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificates	s of Status				
Special Instructions to Filing Officer:						
į						





600427854306

04/16/24--01022--018 **25.00

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:	H LLC						
2. (a)	2872 FALLOW CIRCLE		(b) 2872 FALLOW CIRCLE					
z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limit				
	JACKSONVILLE, FL 32225	 -	JACKSO	ONVILLE, FL 32225				
	03/14/2024		L2400012	27977				
3.	Date of filing/registration in Florida	4.		Document number	ار الم	2024		
5. (a)	ARROYO, ALEXANDRA				ALL	I APR		
` '	Registered Agent and Registered Office shown on the records of 2872 FALLOW CIRCLE	ate:		й 16	* 0 **** * * *			
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRI	SSS	_	SSET O	P# -:	7 mm mm m	
	JACKSONVILLE , F	L_32225	<u> </u>	_		: 5 3		
(b)	ZenBusiness Inc.			_				
	Enter name of NEW Registered Agent and/or NEW Registered Office address:							
	336 E. College Ave							
	NEW Registered Office Address:							
	Suite 301	· · · · · · · · · · · · · · · · · · ·		<u> </u>				
	Tallahassee , F	L_32301		_				
change agent v was/we	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e regist liability of the l	ered office a company, it imited liabil	nd the business office is hereby confirmed ity company or as other	e of the r	register change	ed (s)	
	lexandra Arroyo	<u> </u>	lexandra Arro					
	ture of a member or authorized representative of a member			Printed or typed name	-			
provisi the obi to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and completifications of my position as registered agent as providely reflect a change in the registered office address, I din writing of this change.	gree to d e perfor led for it l hereby	ict in this ca mance of my 1 Chapter 60 confirm tha	pacity. I further agre o duties, and I am fan 15, F.S. Or, if this do t the limited liability	ze to con niliar wit cument i company	iply wi th and i is being y has b	th the accept g filed een	
Than.	re of Registered Agent							

٠ 🗻 🕏

COVER LETTER

TO: Registration Section Division of Corporations			
Vampy Witch LLC SUBJECT:			
Name of Limited L	iability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and	I fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the	following:		
Cameron Biddy			
Name of Person	_		
ZenBusiness Inc.			
Firm/Company			
	2024 APR 16 SECRETALL ALE		
336 E. College Ave. Suite 301			
Address			
Tallahassee, FL 32301	PH 1: 53		
City/State and Zip Code			
ra@zenbusiness.com	:*1		
E-mail address: (to be used for future annual report noti	fication)		
For further information concerning this matter, please call:			
Cameron Biddy 844	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 following amount:			
■ \$25 Filing Fee □ \$	\$55 Filing Fee & Certified Copy		
INHS18 (2/14)			