

8/23/24, 12:29 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L24000149062

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**LLC REGISTERED AGENT CHANGE
6139 HOLLYWOOD, LLC**

Certificate of Status	0
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K. SALY

AUG 26 2024

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Help

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **6139 Hollywood, 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:

Erika Easter

Name of Person

eMinutes

Firm/Company

1 Rockefeller Plaza Suite 1204

Address

New York, NY 10020

City/State and Zip Code

eteam@eminutes.com

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

For further information concerning this matter, please call:

Erika Easter

Name of Person

at (**310**) **820-1000**

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: 6139 Hollywood, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

21650 Oxnard St, Suite 2400
Woodland Hills, CA 91367

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

21650 Oxnard St, Suite 2400
Woodland Hills, CA 91367

04-01-2024

L24000149062

3. Date of filing/registration in Florida

4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

GKL REGISTERED AGENTS, INC.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

28089 VANDERBILT DR., SUITE 201
BONITA SPRINGS, FL 34134

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

eResidentAgent, Inc.

NEW Registered Office Address:

115 N Calhoun St Suite 4

Tallahassee, FL 32301

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

Erika Easter

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

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STATE DEPT. OF REVENUE
TALLAHASSEE, FLORIDA