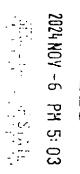


(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
J. HORNE						
DEC - 5 2024						
J. HORNE DEC - 5 2024						





11/08/24--01018--013 **25.00



COVER LETTER

TO: Registration Section Division of Corporations								
Sarasota Bronzing LLC SUBJECT:								
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 concernir	ng this matter to the following:							
Taylor L Kelly								
Name of Person								
Sarasota Bronzing LLC								
Firm/Company								
910 17th Avenue West								
Address								
Palmetto, FL 34221								
City/State and Zip Co	ode							
Taylork38@gmail.com								
E-mail address: (to be used for future	e annual report notification)							
For further information concerning this ma	atter, please call:							
Taylor L Kelly	412 304-6430 at ()							
Name of Person	Area Code & Daytime Telephone Nu	ımber						
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 follow	wing amount:							
■ \$25 Filing Fee	S55 Filing Fee & Certified Copy							
INHS18 (2/14)								

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.

. (a)		(b)		
	Principal office address of limited liability company:			Mailing address	of limited liability company:
	(Note: MUST BE STREET ADDRESS) No change		(Note: MAY BE POST OFFICE BON) 910 17th Avenue West		
		Palmetto, FL, 34221 .			
	April 14, 2024		L24000181241		
	Date of filing/registration in Florida	4.		Document nu	umber
. (a)	Taylor I. Kelly				
. (u)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of Sta	ite:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES.	<u>S)</u>	_	
	1829 Pleasant Maple Court				2021
	Bradenton FI	34211		_	F1L (2024 NOV -6
	, , , , , , , , , , , , , , , , , , ,				FILED OV-6 PM
(b)					- (''
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office ac	<u>ldress</u> :		
					: 03
	NEW Registered Office Address:			_	
	910 17th Avenue West				
	Palmetto FI		3422	<i>j</i> ·	
`the l	imited liability company is not organized under the lay or changes are made, the Florida street address of the	ws of the	: State of Fl ed office at	lorida, it is her	eby confirmed that after the coffice of the registered
gent v	vill be identical. Or, in the case of a Florida limited lia	ability co	ompany, it i	is hereby conf	irmed that the change(s)
	ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the				as otherwise provided in
7	and I Kelly		lor L Kelly		
Signa	ture of almember or authorized representative of a member			Printed or type	d name of signee
rovisi ie obi	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It	perform d for in (ance of my Chapter 60.	duties, and Le 5, F.S. Or, if t	ım familiar with and accep his document is being filed
	err regreet tregterige fri trie registelett trettitte tittle Caa, i i		orginal mai	me mane a ma	company ma occu-
	d in writing of this change.	-			

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