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(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



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FILLARY OF STATE

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TO: Registration Section Division of Corporations

Rey's investment 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 concerning this matter to the following:

Tierra W

Name of Person

ZenBusiness Inc.

Firm/Company

336 E. College Ave. Suite 301

Address

Tallahassee, FL 32301

City/State and Zip Code

ra@zenbusiness.com

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

For further information concerning this matter, please call:

Tierra W	844 493-6249 at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303
Tananassee, FL 52514	

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.

(a)	4300 North University Drive		(b)	4300 No	rth Univers	ity Dri	ve		
()	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y:			Mailing ad (Note: A				y company <u>CE BOX</u>)
	Lauderhill, FL 33351			Lauderhi	11, FL 3335	1			
	04/24/2024]	1,24000192	2343	-			
(a)	Date of filing/registration in Florida Reymelein Saint Jean	4.	-		Docume	nt nun	nber		
()	Registered Agent and Registered Office shown on the reco	ds of the Flor	-ida I						
	4300 North University Drive	ds of the Fio	nua	Dept. of St	ite:				
				·					
	4300 North University Drive		<u>:S.S)</u>	·			SECF	2024 v	لاحد ۲۱
ь)	4300 North University Drive Registered Office Address (MUST BE FLORIDA STR	<u>EET ADDRE</u>	<u>:S.S)</u>	·			SECRETA TALLA	2024 JUN 1	۲۵۰۰۶ ۲۵۲۶ ۱۰۰۰۰
(b)	4300 North University Drive Registered Office Address <u>(MUST BE FLORIDA STR</u> Lauderhill	<u>EET ADDRE</u> _, FL	<u>(5.5)</u>				SECRETARY O	2024 JUN 1 1 PI	5215
(b)	4300 North University Drive Registered Office Address (MUST BE FLORIDA STR Lauderhill ZenBusiness Inc.	<u>EET ADDRE</u> _, FL	<u>(5.5)</u>				SECRETARY OF SI TALLAP SSEE F	2024 JUN 11 PH 3:	·
(b)	4300 North University Drive Registered Office Address (MUST BE FLORIDA STR Lauderhill ZenBusiness Inc. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>	<u>EET ADDRE</u> _, FL	<u>(5.5)</u>				SECRETARY OF STATE TALLAH'SSEE, FL	P	5 17 - - 27 - 2 - 2 - 2

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.

/S/ Reymelein Saint Jean

Reymelein Saint Jean

Signature of a member or authorized representative of a member

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 Criting of this change.

ignature of Registered Agent

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