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LLC RATRO Change

A. RAMSEY NOV 19 2074

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	WILSHIRE WIDGETS LLC		
_ •		Name of Limited Lia	ability Company
Dear S	Sir or Madam:		
The er	closed Registered Agent/Registered	Office Change and f	ee(s) are submitted for filing.
Please	return all correspondence concerning	g this matter to the fo	ollowing:
RONA	LD J TAURO		
	Name of Person		_
WILSI	HIRE WIDGETS LLC		
	Firm/Company		_
2939 C	CAPTIVA DR		
	Address		_
SARA	SOTA, FL 34231		
	City/State and Zip Coo	le	_
ronald	itauro@gmail.com		
	E-mail address: (to be used for future	annual report notific	cation)
For fu	rther information concerning this ma	tter, please call:	
Ronald	I J Tauro	330 at (727-3502
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address: Registration Section		Street Address: Registration Section
	Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
	rananassee, r.E. 32314		Tallahassee, FL 32303
	Enclosed is a check for the follow	ing amount:	
	■ \$25 Filing Fee	□ \$5	5 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.

1. N	ame of the limited liability company: WILSHIRE WIDC	ETS:	LLC		
2. (a)	2939 CAPTIVA DR		(b) 2939	CAPTIVA DR	
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(4)		lress of limited liability company: AY BE POST OFFICE BOX)
	SARASOTA. FL 34231		SAR.	ASOTA, FL 342	231
	05/21/24	_	L2400	0235177	
3.	Date of filing/registration in Florida	4.		Documer	nt number
5. (a	ERIK TREUTLEIN, US CORP, AGENTS				
5. (a)	Registered Agent and Registered Office shown on the records of the	he Flor	ida Dept. o	of State:	202
	UNITED STATES CORPORTATION AGENTS, INC.				2024 OCT
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				OT 29 PH
	476 RIVERSIDE AVE.				A Th
	JACKSONVILLE . FL	32202			PHZ PHZ
(b)	Enter name of NEW Registered Agent and/or NEW Registered RONALD J TAURO	Office	address:		2
	NEW Registered Office Address:				
	2939 CAPTIVA DR				
	SARASOTA , FL	34231			
chang agent was/w the ari	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the lature of a member or authorized representative of a member	regist bility f the l limite R	ered offi company imited li d liability ONALD	ce and the busi y, it is hereby c ability compan y company. J TAURO	iness office of the registered confirmed that the change(s) by or as otherwise provided in rtyped name of signee
provis the ob to me	eby accept the appointment as registered agent and agre- sions of all statutes relative to the proper and complete p digations of my position as registered agent as provided rely reflect a change in the registered office address, I he ed in writing of this change.	perfor l for i	mance o n Chapte	f mv duties, an er 605, F.SOr	d Lam familiar with and accept ; if this document is being filed

Signature of Registered Agent