

L24000259910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

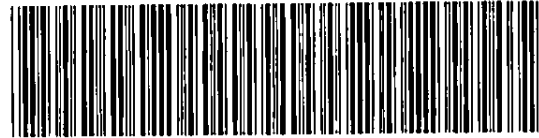
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J. HORNE
SEP - y 2024

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P: 866.625.0838
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Account#: I20000000088
If there are any issues
please contact Patrice at
850-202-9071

Date: 09/06/2024

Name: Patrice Rush

Reference #: 2492579

Entity Name: MSN SENTINEL LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25.00

Signature: 



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Signature: 

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MSN Sentinel 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:

Maria Acevedo, Esq.

Name of Person

Acevedo Belt, P.A.

Firm/Company

1441 Brickell Avenue, Suite 1400

Address

Miami, Florida 33131

City/State and Zip Code

maria@acevedobelt.com

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

For further information concerning this matter, please call:

Maria Acevedo, Esq.

305

396-4282

at (_____) _____

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

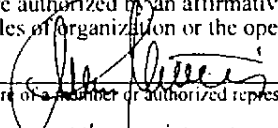
☐ \$55 Filing Fee & Certified Copy

**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: MSN Sentinel LLC
2. (a) 600 Brickell Ave
Principal office address of limited liability company.
(Note: **MUST BE STREET ADDRESS**)
Suite 2950
Miami, FL 33131
- (b) 600 Brickell Ave
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Suite 2950
Miami, FL 33131
3. June 6, 2024
Date of filing/registration in Florida
4. L24000259910
Document number
5. (a) Sub Rosa Law PLLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
8325 NE 2nd Ave
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Suite 206
Miami, FL 33138
- (b) Cogeneity Global Inc.
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
115 N Calhoun Street
NEW Registered Office Address:
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

Gabriele Bartolucci

Printed or typed name of signer

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.

/s/ Constance Lawson Assistant Secretary

Signature of Registered Agent

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

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2024 SEP -6 AM 10:46
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