

L24000264571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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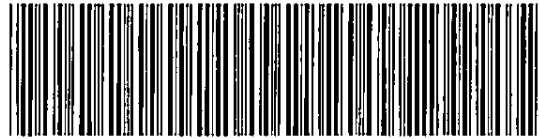
(Business Entity Name)

(Document Number)

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OFFICE OF STATE
TALLAHASSEE, FL

2024 DEC -4 PM 4:50

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Journey Ghost 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:

Brenda E. Byrne

Name of Person

Ybor Management, LLC

Firm/Company

1310 N. 22nd. Street

Address

Tampa, Florida 33605

City/State and Zip Code

rosana85@icloud.com

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

For further information concerning this matter, please call:

Brenda E. Byrne

813

248-5704

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

2023 DEC -4 PM 4:50
STATE
TALLAHASSEE, FL

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**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: The Journey Ghost LLC

2. (a) 2716 W. Woodlawn Ave. (b) 2716 W. Woodlawn Ave.

Principal office address of limited liability company.

Mailing address of limited liability company

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Tampa, Florida 33607

Tampa, Florida 33607

June 10, 2024

124000264571

3. Date of filing/registration in Florida

4. Document number

5. (a) Isamary Gonzalez

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2716 W. Woodlawn Ave

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Tampa, FL 33607

(b) Brenda E. Byrne

Enter name of NEW Registered Agent and/or NEW Registered Office address

1310 N. 22nd Street

NEW Registered Office Address:

Tampa, FL 33605

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2024 DEC -4 PM 4:50
STATE
TAMPA, FL

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.

Rosanna Fuente

Rosanna Fuente

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 writing of this change.

Brenda E. Byrne

Signature of Registered Agent