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(Re	questor's Name)
(Ad	dress)
(Åd	dress)
(Cit	y/State/Zip/Phone #)
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2024 SEP 12 Fill: 20

COVER LETTER

TO: Registration Section Division of Corporation	ons								
COCONUT STOR									
Name of Limited Liability Company									
Dear Sir or Madam:									
The enclosed Registered Ager	t/Registered Offic	ce Change ai	nd fee(s) are submitted for filing.						
Please return all corresponden	ce concerning this	s matter to th	ne following:						
BANU OZSAVASCI									
Name	of Person								
OZ LAWS & CONSULTING									
Firm/	Company		 _						
1330 AVENUE OF THE AMER	ICAS								
Ado	fress	<u> </u>							
SUITE 23A NEW YORK NY 10	Ю19								
City/State	and Zip Code								
banu@oz-laws.com									
E-mail address: (to be us	ed for future annu	ial report no	tification)						
For further information conce	ming this matter,	please call:							
BANU OZSAVASCI		9i7 at (8261491)						
Name of Pers	on	(Area Code & Daytime Telephone Number						
Mailing Address: Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
Enclosed is a check f	or 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.

l. Na	nme of the limited liability company: COCONUT STO	OCK TAM	PA LLC			
2. (a)		(b)			
L. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		/	Mailing address of limited (Note: MAY BE POST		
	28210 PASEO DR. STE 190-236		28210 PA	SEO DR. STE 190-236		
	WESLEY CHAPEL FL 33543	_	WESLEY	CHAPEL FL 33543		
	06/27/2024		L24000 2 90	0867		
3.	Date of filing/registration in Florida	— 4.		Document number		
- ()	NORTHWEST REGISTERED AGENT LLC					
5. (a)	Registered Agent and Registered Office shown on the records o	of the Florida	Dept, of Sta	_ le:		
					20	
	Registered Office Address (MUST BE FLORIDA STREET	TADDRESS	<u> </u>		<u>7</u> 1, S	
	7901 4TH ST N. STE 300				2021, SEP-12	U ∰ -==
	ST PETERSBURG	33702		_		_
(b)	TOROS EMRE KUT Enter name of NEW Registered Agent and/or NEW Registered	ed Office ad	dress:	_	MHT: 20	, , , , , , , , , , , , , , , , , , ,
	NEW Registered Office Address:			_		
	28210 PASEO DR. STE 190-236			_		
	WESLEY CHAPEL, F	FL33543		_		