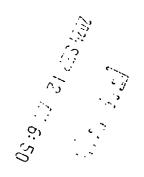
L 24000318851

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
(City/State/Zip/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1
Imill
Office Use Only
Office Ose Offix



600436196386

08/02/2/---01/10--024 **25/03



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Grandpa Boilds Cre Name of Limite	ed 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:
Wallace Cook Name of Person Grandpa Builds Credit LLC Firm/Company	
2000 Cheney Hwy, Ste 103.	- 28 <u>6</u>
Titus ville, FL 32780 City/State and Zip Code	
Grand Pa (a) Grand pabuilds Credit E-mail address: (to be used for future annual report n	<u>(. COm</u> otification)
For further information concerning this matter, please call:	
Wallace Cook at (3)	2/ <u>863-2869</u> 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:	
Ճ \$25 Filing Fee □	\$55 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.	Na	me of the limited liability company: <u>Grandpa</u>	Buile	15	Credit LLC	
2		•				
	(4)	Principal office address of limited liability company:	_ (0	'	2000 Cheney Hwy. Mailing address of limited liability company	
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)	
		Ste, 103-286	_		5te. 103-286	
		Titusville, FL 32780	_		Titusville, FL 32780	
		08/23/2024 Date of filing/registration in Florida			L24000378851	
3.		Date of filing/registration in Florida	4.		Document number	
5	(a)	COOK WILL				
٠.	(4)	Registered Agent and Registered Office shown on the records of th	e Florida	Dept	pt. of State:	
		5527 Jearling Dave			pt. of State:	Ţ
		5527 Yearling Drive Registered Office Address (MUST RE FLORIDA STREET AL	DRESS			ت بن •
						
		Titusville ,FL	3278	0	<u> </u>	
	<i>(</i> 1)	NA			л О	
		Enter name of NEW Registered Agent and/or NEW Registered O	Office ado	lrecc	.e.	
			,,,,,,,	11 435	2.	
		2000 Cheney Hwy				
		NEW Registered Office Address:				
		Ste 103-286				
						
		Titusville FL	327	780	0	
IF el	ha li					
cha	nge	mited liability company is not organized under the laws or changes are made, the Florida street address of the re	gistere	d off	ffice and the business office of the registered	i
age	nt w	rill be identical. Or, in the ease of a Florida limited liab re authorized by an affirmative vote of the members of	ility cor	npai	any, it is hereby confirmed that the change(s)
the	artic	eles of organization or the operating agreement of the lin	mited li	abili	lity company.	111
	A	rolled Cook		h	Vallace Cook Printed or typed name of signee	
	_	ure of a member or authorized representative of a member				
I ho pro	ereb visid	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe	to act i	in th	his capacity. I further agree to comply with a of my duties, and I am familiar with and ac	the cent
the to n	obli, ne r e	ons of all statutes relative to the proper and complete pe gations of my position as registered agent as provided f ly reflect a change in the registered office address, I hel	őr in Ci reby coi	hapi nfirn	oter 605, F.S. Or, if this document is being fi on that the limited liability company has bee	iled n
noti	fjed	in writing by this change.		y		••
Sign	natur	e of Registered Agent				