Division of Corporations

Fax: 18134365206

## Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000351402 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC REGISTERED AGENT CHANGE AA&KH LLC

Certificate of Status Certified Copy Page Count Estimated Charge

02 \$25.00

Electronic Filing Menu Corporate Filing Menu

Help

## 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:		
2. (a)		(b)	
(w)	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	7901 4th St N Ste 300	7901 4th St N Ste 300	
	St. Petersburg FL 33702	St. Pe	tersburg FL 33702
	10/01/24	L24000	425081
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	NORTHWEST REGISTERED AGENT LLC		
J. (a)	Registered Agent and Registered Office shown on the records of	f the Florida Dept. of	State:
	7901 4TH ST N		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		<del></del>
	STE 300		
	ST. PETERSBURG, FI	L 33702	
(b)	Registered Agents Inc		2025 OCT
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
	7901 4th St N		
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg	33702 L	
the cha agent was/w the art	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registered of iability company of the limited lia	office and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in company.
Signa	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob- to mer natifie	thy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I do not in writing of this change.  David Roberts - Assistant S	e performance of ed for in Chapter hereby confirm i	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed that the limited liability company has been
Signati	are of Registered Agent	•	