12/17/24, 11:24 AM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

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From:

Account Name : REGISTERED AGENTS INC.

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

்ளை pual report mailings. Enter only one email address please.\*\* சிரைப் Address: \_

## LLC REGISTERED AGENT CHANGE **BD STORES LLC**

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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. 8	Tame of the limited liability company:	_C	
2. (a)	· · · · · · · · · · · · · · · · · · ·	(b)	
()	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10/21/24		00-447183
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	ZENBUSINESS INC.  Registered Agent and Registered Office shown on the records of	of the Elected Dort	at Status
	335 E. COLLEGE AVE.	ar the Proctus (repr.	or state.
	Registered Office Address (MUST BE FLORIDA STREE	r addressi	•
	SUITE 301		
	TALLAHASSEE		<del></del> -
	TALLAHASSEE	. [	<del>-</del>
	Registered Agents Inc		;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
	Enter name of NEW Registered Agent and/or NEW Registers	ed Office address:	
	7901 4th St N		
	NEW Registered Office Address:		,
	STE 300		
	St. Petersburg	1.33702	<del></del>
the ch agent was/w the art	limited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the registered liability compar s of the limited f	office and the business office of the registered by, it is hereby confirmed that the change(s) lability company or as otherwise provided in ty company.
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
Lhere provis the ob to mei	thy accept the appointment as registered agent and a sions of all statutes relative to the proper and complet ligations of my position as registered agent as provid rely reflect a change in the registered office address, ad in writing of this change.		• • • • • • • • • • • • • • • • • • • •
	David Roberts - Assistant	Secretary	
Signal	ure of Wegistered Agent		