Page: 1/2

Fax: 18134365206

Division of Corporations

3/6/25, 8:45 AM da 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.

(((H25000084249 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

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

Email Address:_

LLC REGISTERED AGENT CHANGE NEXT LEVEL UP ENDEAVORS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$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:	ENDEAVO	ORS, LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 7901 4th St N STE 300		Mailing address of limited liability company (Note: MAY RE POST OFFICE ROX) 7901 4th St N STE 300	:
	St. Petersburg FL 33702	-	St. Petersburg FL 33702	
	02/14/25	L	L25000062850	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a	CHELLINI, ANTHONY			
(b) .	Registered Agent and Registered Office shown on the records of	the Florida I	Dept. of State:	
	7901 4TH ST N			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	<u></u>	
	STE 300			
	ST. PETERSBURG . FL	33702		
	Northwest Registered Agent LLC		2025 MAR SECRETA	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		AR -6	
	7901 4th St N		-6 ## Assert	
	NEW Registered Office Address:			
	STE 300		≋ ≒ ω	
	St. Petersburg	33702	ř.j	
the ch agent was/w	limited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited literer authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of the S the registe ability con of the limit	tered office and the business office of the regis mpany, it is hereby confirmed that the change(sited liability company or as otherwise provided	tereo s)
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee	
provis the ob to mei	eby accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as providerely reflect a change in the registered office address, I led in writing of this change. Taylor Newman - Assistant Se	performar d for in Ch hereby con	in this capacity. I further agree to comply with ince of my duties, and I am familiar with and a hapter 605, F.S. Or, if this document is being infirm that the limited liability company has be	ı the ccep filed en
Signat	ure of Revistered Agent	•		