Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : The things We Do PR LLC

Account Number : I20250000049 : (307)689-0983 Phone Fax Number : (307)459-5911

**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 TRAVEL SNOB LLC

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COVER LETTER

TO: Registration Section Division of Corporations								
Travel Snob LLC SUBJECT:								
	Name of Limited Liability Company							
Dear Sir or Madam:								
The enclosed Registered Agent/Registe	ered Office Change	and fee(s) are submitted for filing.						
Please return all correspondence conce	rning this matter to	the following:						
Andrew Pierce								
Name of Perso	n							
Cindy's Florida LLC								
Firm/Company) '							
8051 N. Tamiami Trail STE E6								
Address								
Sarasota, Florida, 34243								
City/State and Zip	Code							
reports@cloudpeaklaw.com								
E-mail address: (to be used for fu	ture annual report n	otification)						
For further information concerning this	matter, please call:							
Andrew Pierce	307 at (683-0983						
Name of Person	\	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 fo	Howing amount:							
S25 Filing Fee		1 \$55 Filing Fee & Certified Copy						

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR

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.

LIMITED LIABILITY COMPANY

1. N	ame of the limited liability company:	,				
2. (a) 8051 N. Tamiami Trail STE E6			8051 N. Tamiami Trail STE E6			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Sarasota, FL 34243	_	Saras	sota, FL 34243		
	05/09/2025		L25000	0221017		
 (a) 	Date of tiling/registration in Florida ENTITY PROTECT RA SERVICES	4.		Document number		
u. (=)	Registered Agent and Registered Office shown on the records of t 625 E TWIGGS ST. STE 110-A	he Flori	da Dept, of	'State:		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE.	<u>SS)</u>			
	TAMPA, FL, FL	33602		2025 OCT 13		
(b)	Cindy's Florida LLC			. <u>개 . 원</u> 프 글날리		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	iddress:			
	8051 N. Tamiami Trail STE E6			PHI2: 0		
	NEW Registered Office Address:					
	Sarasota, Florida, 34243, FL.	34243				
change agent ' was/w	limited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the l	registe bility of the li imited	red office ompany, mited lial liability	e and the business office of the registered it is hereby confirmed that the change(s) bility company or as otherwise provided in company.		
Sinne	iture of a member or authorized representative of a member	<u> </u>	idrew Pie	Printed or typed name of signee		
I here provis the ob- to mer notifie	by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	e (6 ac ferfort for in ereby (et in this c nance of i Chaptèr confirm ti	canacity - I further agree to comply with the		