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(Re	questor's Name)	
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COVER LETTER

TO:

то:	Registration Section Division of Corporations						
SUBJ.	ECT: BIG BLONDES, LLC						
	Nam	e of Limited Li	iability Company				
Dear S	Sir or Madam:						
The er	nclosed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning thi	s matter to the	following:				
Char	les A. Carlson, Esq.						
	Name of Person						
Olde	r, Lundy, Koch & Martino						
	Firm/Company						
1000	W. Cass Street						
	Address						
Tam	pa, Florida 33606	<u></u>					
	City/State and Zip Code						
	son@olalaw.com						
	E-mail address: (to be used for future ann	ual report notif	ication)				
For fu	rther information concerning this matter,	please call:					
Char	les A. Carlson, Esq.	at (<u></u> 813	254-8998				
	Name of Person		Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
	Enclosed is a check for the following amount:						
	2 \$25 Filing Fee	□ \$	55 Filing Fee & Certified Copy				
INHSI	8 (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: BIG BLONDES	S, LL	_C					
2. (c/o Charles A. Carlson / Older, Lundy, Koch &			c/o Cha	arles A. Ca	rlson / O	ider, l	_undy, Kod
~. (()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)		Mailing addres	s of limited	liability	company:
		1000 W. Cass Street			1000 W. Cass Street				
		Tampa, FL 33606	_		Tampa,	FL 33606	- -		
		08/10/2012		ı	M120000	004545			
3.		Date of filing/registration in Florida	4.			Document	number		
5.	(a)	Accounting Resources and Management Ser	vice	s, I	LLC				
- .	(-)	Registered Agent and Registered Office shown on the records of the	ne Flor	ida	Dept. of Stat	te:			
		34921 US-19 N							
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_				
		STE 210					:[□ :[□	2022	
		Palm Harbor , FI				_	##		र संदर
								27	Ţ :
(b)	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		_	15 c	PH	¥ 1 1		
		The state of the s	J.1.1.C		<u> </u>				
		Charles A. Carlson, Esq.						20	
		NEW Registered Office Address:				_			
		1000 W. Cass Street	.= .			_			
		Tampa ,FL	3360	6		_			
the age was the	cha nt w s/we artic	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability of a member or authorized representative of a member	he repositive the land	gist cor imi d li	ered officen npany, it i ted liabilit	e and the bus is hereby con ty company o npany. lea	siness offi firmed the or as other	ce of that the c wise pr	ne registered hange(s)
	_	·	a fa -		in elein no-	Printed or typ		~	سان بالاستان
pro the to n	visio obli iere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change. Callen	e to a perfor for in ereby	ict ma 1 C co.	in this cap nce of my hapter 605 nfirm that	acity. I furth duties, and I 5, F.S. Or, if the limited I	ner agree ' am famil ' this docu iability co	io com iar with ment is mpany	pty with the i and accept being filed has been

Signature of Registered Agent