8/10/2021



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11 OR:

Division of Corporations

Fax Number : (850)617-6383

წ From:

Account Name : URS AGENTS LLC Account Number : 120150000127 Phone : (800)567-4397 Fax Number : (800)567-4398

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

Email Address: legal@porch.com

LLC REGISTERED AGENT CHANGE WELCOME WAGON LLC

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COVER LETTER

	gistration Section vision of Corporations				
UBJECT	WELCOME WAGON LLC				
OBJECT	Nan	Name of Limited Liability Company			
ear Sir or	Madam:		•		
he enclos	ed Registered Agent/Registered Off	fice Change and fo	ee(s) are submitted for filing.		
ease retu	rn all correspondence concerning th	is matter to the fo	ollowing:		
1ATTHE	EW CULLEN				
	Name of Person		_		
VELCO	ME WAGON LLC				
	Firm/Company		_		
830 CC	RAL RIDGE DR SUITE 240				
	Address		_		
CORAL	SPRINGS, FL 33076		_		
	City/State and Zip Code	<u> </u>	-		
	a@urscompliance.com		- . 、		
	il address: (to be used for future an		cation)		
or further	r information concerning this matter	; please call:			
JR\$ Ag	ents ATTN Kanetha Bishop	800	567-4397		
	Name of Person		Area Code & Daytime Telephone Number		
Re Di Cl 26	FREET/COURIER ADDRESS: egistration Section lylsion of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301	Reg Div P.O	ILING ADDRESS: sistration Section sision of Corporations Sox 6327 shassee, Florida 32314		
E	nclosed is a check for the followin	g amount:			
2	\$25 Filing Fee	□ \$ 5	5 Filing Fee & Certified Copy		
NHS18 (2	/14)				

(((H21000302217 3)))

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.

ļ. N	ame of the limited liability company: WELCOME	WAGO	N LLC		<u> </u>	_	-
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 5830 CORAL RIDGE DR STE 240	((b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 5830 CORAL RIDGE DR STE 240				-
	CORAL SPRINGS, FL 33076	CORAL SPRINGS, FL 33076					
	05/22/2014		M1400	00003495			
3.	Date of filing/registration in Florida	— 4.		Document number		-	-
5. (a)	Registered Agent and Registered Office shown on the records o PATRICK O'REILLY Registered Office Address (MUST BE FLORIDA STREET) 5830 CORAL RIDGE DR SUITE 240			State:	TALL!	2021	
	CORAL SPRINGS	33076	3		AHASSEI	2021 AUG 11	τη :=
(b)	Enter name of NEW Registered Agent and/or NEW Roststers URS AGENTS, LLC NEW Registered Office Address:	ed Office a	ddress:			AH 9: 00	BO
	3458 LAKESHORE DRIVE						
	TALLAHASSEE , F	L 32312	2				
the ch agent	limited liability company is not organized under the leange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited learner authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the reg liability of of the line e limited	istered of company, mited list lisbility	ffice and the business office it is hereby confirmed the olity company or as other company.	ce of the re at the chang	gistere ge(s)	: d
	miles Cullen	M	atthew (Cullen Printed or typed name of	elence		-
! here provis the ob to men notific	sture of a member or authorized representative of a member seby accept the appointment as registered agent and as stions of all statutes relative to the proper and completely lighted agent as providing the straight of my position as registered agent as providingly reflect a change in the registered office address, is add nurthing of this change. Kanetha Blanop, Asst. Secretary ure of Registered Agent	gree to a e perform led for in I hereby	ci in this nance of Chapter confirm t			with the d accep ing filed been	ot d

Division of Corporationse P.O. Box 6327e Tallahassee, FL 32314 FILING FEE: \$25.00