## M15000006620

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| - Inothe Managed Solutions, LLC - 1336 SE 4745+.  - apc Coval, FL 33904 - |  |  |  |  |  |
|---|--|--|--|--|--|
| — ape Coval, FC 33904 -   |  |  |  |  |  |
| (Address)   |  |  |  |  |  |
| (City/State/Zip/Phone #)  |  |  |  |  |  |
| PICK-UP WAIT MAIL   |  |  |  |  |  |
| (Business Entity Name)  |  |  |  |  |  |
| (Document Number)   |  |  |  |  |  |
| Certified Copies Certificates of Status                                   |  |  |  |  |  |
| Special Instructions to Filing Officer:                                   |  |  |  |  |  |
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Office Use Only



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ZOZO AUG ZU PH 3: 43



August 11, 2023

TODD COPIC 1336 SE 47TH ST CAPE CORAL, FL 33904

SUBJECT: INSITE MANAGED SOLUTIONS, LLC

Ref. Number: M15000006620

We have received your document for INSITE MANAGED SOLUTIONS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PROFIT CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

1 AUG 6 4 2023 1:

Letter Number: 123A00018349

## 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.

| (a)                   | 1336 SE 47th St  | (b)   | 1336 SE 47th St  |  |  |
|-----------------------|--|---|--|--|--|
| (u)                   | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)   |   | Mailing address of limited liabili (Note: MAY BE POST OFF)         |  |  |
|                       | Cape Coral, FL 33904   |   | Cape Coral, FL 339   | 04   |  |
|                       | 01/29/2007   | ]   | 115000006620   |  |  |
| (a)                   | Date of filing/registration in Florida Harvey Rollings   | 4.  | Docume   | nt number  |  |
| (b)                   | Registered Agent and Registered Office shown on the records 1633 SE 47th Terr  | of the Florida  | Dept. of State:  |  |  |
|                       | Registered Office Address (MUST BE FLORIDA STREE   | ET ADDRESS  |  |  |  |
|                       | Cape Coral ,   | FL_33904  |  | ZOZO AUG   |  |
|                       | Christopher J Rozum  |   |  | AUG 24   |  |
|                       | Enter name of NEW Registered Agent and/or NEW Register   | red Office add  | <u>ess</u> :   | mr.  |  |
|                       | 1336 SE 47th St  |   |  | PH 3:  |  |
|                       | NEW Registered Office Address:   |   |  | 43   |  |
|                       | Cape Coral   | FL  |  |  |  |
| ange<br>ent v<br>as/w | imited liability company is not organized under the cor changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street control of the c | the registered<br>liability controllians<br>of the limited limited li | office and the busi<br>pany, it is hereby c<br>ed liability compan | ness office of the registered confirmed that the change(s) |  |
| Signa                 | ture of a member or authorized representative of a member  |   | Printed or   | typed name of signee                                       |  |
| ovis.<br>e obi<br>mer | by accept the appointment as registered agent and a joins of all statutes relative to the proper and completing tions of my position as registered agent as provied reflect a change in the registered office address, and in writing of this change.  | ete performa  | ce of my duties, an  | d I am familiar with and acce                              |  |

**FILING FEE: \$25.00**