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COVER LETTER

TO: Registration Section Division of Corporations					
RUSKIN STREET. LLC SUBJECT:					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to	o the following:				
CARL SHEWMAKER					
Name of Person					
Firm/Company					
75 ELYSBE CT					
Address					
ALYS BEACH, FL 32461					
City/State and Zip Code					
RITCHIE.SHEWMAKER@GMAIL.COM					
E-mail address: (to be used for future annual report	notification)				
For further information concerning this matter, please cal	11:				
CARL SHEWMAKER 502	396-8054				
Name of Person	Area Code & Daytime Telephone Numbe				
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 following amount:					
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				

INHS18 (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.

l. Na	me of the limited liability company:	LLC		
2. (a)	75 ELYSEE CT	(b) 75 ELYSE	E CT
- (-,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		dailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	ALYS BEACH, FL 324611	_	ALYS BEA	ACH, FL 324611
	07/24/2024	_	M17000001	492
3 .	Date of filing/registration in Florida	4.		Document number
5. (a)	CAPITOL CORPORATE SERVICES, INC.			
,, (u)	Registered Agent and Registered Office shown on the records of:	he Flori	da Dept. of State	- #
	Registered Office Address	DDRE:	<u> </u>	-
	TALLAHASSEE , FL	32301		
(b)	CARL SHEWMAKER			
(- ,	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	•
	NEW Registered Office Address:			-
	75 ELYSEE CT			-
	ALYS BEACH , FL	32461		
:hange igent w vas/wo	mited 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 tre authorized by an affirmative vote of the members of eles of organization or the operating agreement of the law.	register oility of the linited	red office and ompany, it is nited liability	If the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signat	urd of a plember of authorized representative of a member			Printed or typed name of signee
provisii he obli o mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. I have this change.	e to ac erforn for in ereby c	et in this capa nance of my a Chapter 605, confirm that t	city. I further agree to comply with the luties, and I am Jamiliar with and accept F.S. Or, if this document is being filed he limited liability company has been