M18 00000 3537

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





100366891631

05/27/21--01017--015 **25.00



COVER LETTER

	gistration Section vision of Corporations				
SUBJECT	Greenlinks, LLC				
SODJECI	Name of Limited Liability Company				
Dear Sir oi	· Madam:				
The enclos	ed Registered Agent/Registered Offi	ce Change a	nd fee(s) are submitted for filing.		
Please retu	rn all correspondence concerning thi	s matter to th	ne following:		
Trevin Wor	kman				
	Name of Person				
	Firm/Company	<u></u>	_ 		
632 North 1	Main Street, Suite 2C				
	Address				
Logan, Uta	h 84321				
	City/State and Zip Code				
trevin@trev	vinworkmanlaw.com				
E-ma	ail address: (to be used for future ann	ual report no	tification)		
For further	information concerning this matter,	please call:			
Trevin Wo	rkman	435 at (753-7530		
	Name of Person	(Area Code & Daytime Telephone Number		
Re D P.	ailing Address: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Ei	nclosed is a check for the following	amount:			
=	\$25 Filing Fee		\$55 Filing Fee & Certified Copy		

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. N	ame of the limited liability company: Greenlinks, LLC	<u>. </u>			
2. (a)		(b)			
~· (··)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(v)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	1271 Federal Heights Drive #406				
	Salt Lake City, Utah 84103				
	04/19/2018	M180	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a	CORPORATION SERVICE COMPANY				
J. (4	Date of filing/registration in Florida 4. Document number CORPORATION SERVICE COMPANY Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1201 HAYS STREET TALLAHASSEE 32301-2525				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	1201 HAYS STREET		2		
	TALLAHASSEE	32301-2525			
(b)	Registered Agents Legal Services, LLC Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office address:	.		
	NEW Registered Office Address:				
	155 Office Plaza Drive, Suite A				
	Tallahassee, FI	32301			
chang agent was/w the ag	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of the organization or the operating agreement of the Tyler	registered off ability compar of the limited l limited liabili	ice and the business office of the registered by, it is hereby confirmed that the change(s) liability company or as otherwise provided in ty company.		
	####ef6f4# thember or authorized representative of a member		Tyler Printed or typed name of signee		
provis the ob to mei notifie	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I did now iting of this change.	ree to act in th	is capacity. I further agree to comply with the		
Signat	Viyya Rice ure of Registered Agent				