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## **COVER LETTER**

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TO: Amendment Section Division of Corporations

SUBJECT: JENNIFER TATTANELL' CREATIONS LLC Name of Corporation

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The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jennidez Tauenelli
Jennider Iguenerer
Name of Contact Person
Jennitler Towonelli Greations MC
Firm/Company
136 EDGEWDOD DR
Address
WEST PALM BEACH FL 33405
City/State and Zip Code
INFO @ JENNIFERTATTANELLI. CON
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GIULIOBLANCAIELLiat (347)7816928Name of Contact PersonArea Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

## 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.

Name of the limited liability company: \_ JENN IFER TATIANELLI CREATIONS LLC 1. 136 EDGEWODDDR - WEIT PALM BRACH 136 EDGEWOOD DR - WEST PAGE BLACH 2. (a) Mailing address of limited liability company: Principal office address of limited liability company (Note: MAY BE POST OFFICE BOX) (Note: MUST BE STREET ADDRESS) FL 33405 33405 M1800009606DGT 25 2018 Date of filing/registration in Florida 3. 5. (a) <u>CI CORPRAIN</u> SYJIEM Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 136 EXENDOD DR Registered Office Address (MUST BE FLORIDA STREET ADDRESS) B:ACH PAM 4 DEC -3 (14 IU: TAJANELLI Enter name of NEW Registered Agent and/or NEW Registered Office address: 136 EDGEWODD DR NEW Registered Office Addre ,FL 33405 PAM BACH 225 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. BLANGIELC - DIEGOL-Printed or typed name of signee GIULIO Signature of a member or authorized representative of a member I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change X 0 л Signature of Registered Agent Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **FILING FEE: \$25.00** 

INHS18 (2/14)