M2000004204

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	idress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



800415235588

2023 SEP 13 AN 10: 05

AN 10: 05

RECEIVED 2023 解P 13 程 年 12



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	09/13/2023	
Name:	Merritt	
Reference #:	2119021	-
Entity Name:	SOUTHBOUND CA	PITAL VENTURES, LLC
_	es of Incorporation/Authorization	o Transact Business
_	dment ge of Agent	
Reins	tatement	
☐ Conve		
	lution/Withdrawal	
_	ous Name	
∐ Other		
Authorized A	mount: \$25	
Signature:	mw	

F: 800.944.6607

COVER LETTER

TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations			
SUBJE	SUBJECT: SOUTHBOUND CAPITAL VENTURES, LLC			
	Nam	e of Limited Liability Company		
Dear Si	r or Madam:			
The enc	closed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.		
Please r	eturn all correspondence concerning the	is matter to the following:		
	Name of Person			
	COGENCY GLOBAL INC.			
	Firm/Company			
	115 North Calhoun Street, Suite	2.4		
	Address			
	Tallahassee, FL 32301			
	City/State and Zip Code			
	dlittwin@dugganbertsch.com			
Е-	mail address: (to be used for future ann	ual report nonfication)		
For furt	her information concerning this matter.	please call:		
		at ()		
	Name of Person	Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
	Enclosed 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.

l. 3	Name of the limited liability company:	sou ⁻	SOUTHBOUND CAPITAL VENTURES, LLC			
2. (a	114 PEPPERTREE LN		(b)	114 PEPPERTRE	ELN	
(Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(")	Mailing address of limited liability comp (Nate: MAY BE POST OFFICE BO.		
	ANNA MARIA, FL 34216			ANNA MARIA, FL 34216		
	05/01/2020			M2000000420	4	
3.	Date of filing/registration in Florida	4.		Document number		
5. (
	Registered Agent and Registered Office shown on the records	of the Flo	rida Dept. of St	ale:		
	875 109TH AVENUE N.					
	Registered Office Address	T ADDR	ESS)	— -		
	Suite 302				21	
	NAPLES	FL	34108)23 SE	
(h	Cogency Global Inc.			HASS	2023 SEP 13	1
`	Enter name of NEW Registered Agent and/or NEW Registered Office address:		– ä	ri ri		
	115 North Calhoun Street, Suit	te 4		ĀĒLĀNASSEE, FLOMBĪĀ	AH 10: 05	,
	NEW Registered Office Address:)5	
	Tallahassee	FL.	32301			
the c agen was/ the a	c limited liability company is not organized under the hange or changes are made, the Florida street address a will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member rticles of organization or the operating agreement of the street of the member of the member of the operating agreement of the street of the member of the operating agreement of the street of the member of the operating agreement of the street of the member of the operating agreement of the street of the operating agreement of the operatin	laws of of the re lability s of the	egistered offi / company, it limited liabil	ice and the business offit is hereby confirmed the lity company or as other ompany. James M. Duggan	ice of the at the charwise pro	registered ange(s)
I her provi the o to me	nature of a member or authorized representative of a member reby accept the appointment as registered agent and a isions of all statutes relative to the proper and comple bligations of my position as registered agent as provi- crely reflect a change in the registered office address, ted in writing of this change.	igree to etc perfo ded for I hereb	act in this co rmance of m in Chapter 6 v confirm the	Printed or typed name of upacity. I further agree y duties, and I am famil 05, F.S. Or, if this docust the limited liability ca		ly with the and accept being filed as been
	/S/ Sean Chase					
Signa	ture of Registered Agent					