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(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:					

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2023 HOY 27 PH 2:

RECEIVED

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv^o

ORDER FORM

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Moreau mmoreau@incserv.com

850.656.7953

REQUEST DATE 11/27/2023

PRIORITY Regular Approval

OUR REF # (Order ID#) 1200460

ORDER ENTITY

ENTERPRISE CONVENIENCE STORES, LLC

PLEASE PERFORM THE FOLLOWING SERVICES: ENTERPRISE CONVENIENCE STORES, LLC (FL)

File the attached change of agent document

NOTES:

\$25.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Monday, November 27, 2023 Page 1 of 1

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	ENTERPRISE CONVENIENC	E STORES, LLC				
50000	Name of Limited Liability Company					
Dear Si	r or Madam:					
The enc	losed Registered Agent/Registered	l Office Change and	fee(s) are submitted for filing.			
Please r	eturn all correspondence concerni	ng this matter to the	following:			
Sapphire	: Marquez					
	Name of Person		 -			
SunDoc	Filings					
	Firm/Company		_			
7801 Fo	Isom Blvd Ste 202					
	Address		_			
Sacrame	ento CA 95826					
	City/State and Zip Co	ode				
jcamp@	majorsmgmt.com					
E-	mail address: (to be used for futur	e annual report notifi	ication)			
For furt	her information concerning this m	atter, please call:				
Julia Ca	mp	770 at (685-7338			
	Name of Person		Area Code & Daytime Telephone Number			
	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 follo	wing 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.

. Na	nme of the limited liability company:	ONVEN	IENCE ST	TORES, LLC	
. (a)	305 A EQUIPMENT COURT	_	(b) 305 A EQUIPMENT COURT Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
(0)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				
	LAWRENCEVILLE, GA 30046		LAWR	EENCEVILLE, GA 30046	
	03/10/2022		M22000	0003661	
	Date of filing/registration in Florida	4.		Document number	
. (a)	SUNDOC FILINGS INCORPORATED				
	Registered Agent and Registered Office shown on the records of 3458 LAKESHORE DRIVE	State:			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	TALLAHASSEE F	L_32312		2023 HOV 27	
(0)	United Agent Group Inc.				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office :	iddress:	-0 . ·	
	801 US Highway I			- H 2:	
	NEW Registered Office Address:			$\overline{\omega}$	
	North Palm Beach	, 33408			
nange gent v as/we ie arti	imited liability company is not organized under the later changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members acles of organization or the operating agreement of the DUSTIN HEWATT	ws of the registe in the line of the line limited	red office company, mited liab	and the business office of the registered it is hereby confirmed that the change(s) pility company or as otherwise provided in company.	
	ture of a member or authorized representative of a member			Printed or typed name of signee	
rovisi ecepti eing f	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete the obligations of my position as registered agent as piledto merely reflect a change in the registered office emotified in writing of this change.	ree to a perfori providea uddress	et in this c nance of n I for in Ch . I hereby	capacity. I further agree to comply with th my duties, and I am familiar with and capter 605, F.S. Or, if this document is confirm that the limited liability company	
	/illiam Huser				
ignatu	re of Registered Agent				