Maadooc 007874

(Requestor's Name) (Address) (Address)	500416565915
(City/State/Zip/Phone #)	LLC RA & RO Change
Special Instructions to Filing Officer:	2023 OCT 11 PM 4: 09 SEORETARY OF STATE FALLAHASSEE, FLORIDA
Office Use Only	A. RAMSEY

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ISEY OCT 12:2023



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

Account#: 12000000088

Date: 10/11/2023

Name: Juliana

Reference #: 2119630

Entity Name: THE KITCHENWORKS OF FORT LAUDERDALE, LLC

Authorized	Amount:	\$25.00	
Signature:	Luchiama	Prestia	
-	V		

EUROPEAN HQ
COGENCY GLOBAL (UK) LIMITED
REGISTRED HENGLAND & WALES,
REGISTRY HOLON2
G LLOYDS AVE, UNIT 4CL,
LONDON EC3N 3AX
+44 (0)20.3961.3080

ASIA PACIFIC HQ
 COGENCY GLOBAL (HK) LIMITED
 A HONG KONG LIMITED COMFANY
 UNIT B, VF, LIPPO LEIGHTON TOWER
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 F: +852.2682.9790

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.

	ame of the limited liability company:		
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BON</u>)
	No Change	N	o Change
	May 19, 2022	_	M22000007874
	Date of filing/registration in Florida	4.	Document number
(a)	CORPORATION SERVICE COMPANY		
(a)	Registered Agent and Registered Office shown on the records of	the Florida Dep	ot, of State:
	1201 HAYS STREET		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	~
			123
	TALLAHASSEE, FI	32301	2023 OCT 11 AM II: 14
b)	COGENCY GLOBAL INC.		
	Enter name of NEW Registered Agent and/or NEW Registered	Office address	s
	115 North Calhoun St., Suite 4		
	NEW Registered Office Address:		
	Tallahassee	22201	
	, Fl	32301	
cha nt v /we	imited liability company is not organized under the la inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the registere ability compa of the limited	ed office and the business office of the registe any, it is hereby confirmed that the change(s) liability company or as otherwise provided in
	n M	Jerem	y Reidy Authorized Person
a Kin	ure of a member or authorized representative of a member		Printed or typed name of signee

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.

/s/ Timothy Mayville

Signature of Registered Agent

¹ Timothy Mayville, Assistant Secretary Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00