M220000 16182

	_					
(Requestor's Name)					
	Address)					
(Audiess)					
(Address)						
,	(1.00.000)					
	City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL				
(Business Entity Name)					
	Document Number)					
(Document Number)					
Certified Copies	Certificates of S	tatus				
Special Instructions to F	Cilina Officar:					
Special instructions to r	ining Officer.					

Office Use Only



700418873277

2023110V 13 PH 4:54

RECEIVED
2012 NOV 13 AN IJ: 32
01VISION 01 CON TELLANAS CONTRACTOR



CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

f • ,

ACCOUNT NO. : I2000000195 REFERENCE : 124395 AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE: November 9, 2023 ORDER TIME : 9:28 AM ORDER NO. : 124395-124 CUSTOMER NO: 8423450 CHANGE OF AGENT NAME: SOUTHERN LITHO ONE LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY CONTACT PERSON: Alexxis Weiland-sorenson

EXAMINER'S INITIALS:

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.	Na	me of the limited liability company:	HO ON	E	LLC			
2.	(a)		(t	b)				
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)		
		9010 STRADA STELL CT STE 103			9010 STR	ADA STELL CT ST	TE 103	
		NAPLES, FL 34109	_		NAPLES, I	FL 34109		
		10/20/2022		ł	M22000016	6182		
3.		Date of filing/registration in Florida	4.	_	I	Document number		
5.	(a)							
J.	(4)	Registered Agent and Registered Office shown on the records of the CAPITOL CORPORATE SERVICES, INC.	the Florida	a I	Dept. of State:	:		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				20		
		515 E PARK AVE 2 FL					2023 1:04	
		TALLAHASSEE, FL	32301				04 i 3	
							•	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			PH L			
		Ellier haile of NEW Registered Agent and/or NEW Registered	(mice au	101	<u>ess</u> .		വ	
		Corporation Service Company					Ŧ,	
		NEW Registered Office Address:						
		1201 Hays Street						
		Tallahassee, FL	32301					
cha age wa	inge ent w s/we	mited liability company is not organized under the law or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members o cles of organization or the operating agreement of the	vs of the registere bility co f the lim	S ed om	tate of Flor office and pany, it is ed liability	the business office hereby confirmed company or as oth	e of the registered that the change(s)	
73/ Daniel Contes				l Conley, A	Authorized Person			
S	ignati	ure of a member or authorized representative of a member				Printed or typed name	of signee	
1 h pro the	ereb ovisio obli	y accept the appointment as registered agent and agre ms of all statutes relative to the proper and complete p gations of my position as registered agent as providea ly reflect a change in the registered office address. I h	e to act performed for in C	ir an Ch	i this capac ce of my di apter 605,	city. I further agre uties, and I am fam F.S. Or, if this do	te to comply with the niliar with and accept cument is being filed	
not	ified	in writing of this change.				ie iimiiea iiabiiiiy d Y, ASST. VICE PI		
C :		Drace C-Kuby	JIM		is is MIMD	T. ASST. VICE FI	NESIDENI	
Sig	natur	e of Registered Agent						