# **Flo**rida Department of State

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Division of Corporations

Fax Number : (850)617-6383

### From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*
Email Address:

PH

LLC REGISTERED AGENT CHANGE

# SIGNATURE LENDING OF FLORIDA, LLC

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## 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

	(b	)	· <del></del>		·	
Principal office address of limited hability com (Note: MUST BE STREET ADDRESS)		.\	Mailing address of fimited hability company ( <u>Note: MAY BE POST OF FICE BOX</u> )			
	<del></del>		<u> </u>	<del></del>		
12/28/22		——— М2300	0000973			
Date of filing/registration in Florida	<del></del>	······································	Document number			
ONE ROSE CONSULTING, LLC						
Registered Agent and Registered Office shown on the re	ecords of the Florida	Dept of State				
7901 4TH ST N.						
Registered Office Address (MUST BE FLORIDA S	STREET ADDRESS					
SUITE 5189						
ST. PETERSBURG	<sub>. FL</sub> 33702	-				
Registered Agents Inc						
Emer name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>	egistered Office add	ress:			2	
7901 4th St N				: • ·	2023 FEB -	
NEW Registered Office Address				, <del>-</del> ^ .	- 8	_1°
STE 300					_	
St. Petersburg	. <sub>FL</sub> 33702			· :	PH 2:	
	• • •	State of Flo		:	8	

the articles of organization or the operating agreement of the limited liability company.

Kolin my Robin Jones

Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

I was feeter

David Roberts - Assistant Secretary

Signature of Registered Agent