M23000007292

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TATT ATTASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations									
SUBJECT: ASNIS LLC									
WBJECT: Name of Limited Liability Company									
Dear Sir or Madam:									
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.								
Please return all correspondence concerning thi	s matter to the following:								
Igor Asnis									
Name of Person									
ASNIS LLC									
Firm/Company									
122 N York Rd, STE 7									
Address									
Hatboro PA 19040									
City/State and Zip Code									
igor@MarketForceRealty.com									
E-mail address: (to be used for future ann	ual report notification)								
For further information concerning this matter.	please call:								
Igor Asnis	at (²¹⁵) 870-3893								
Name of Person	Area Code & Daytime Telephone Number								
STREET/COURIER ADDRESS:	MAILING ADDRESS:								
Registration Section	Registration Section								
Division of Corporations	Division of Corporations								
Clifton Building	P.O. Box 6327 Tallahassee, Florida 32314								
2661 Executive Center Circle Tallahassee, Florida 32301	Farianassee, Florida 32314								
Enclosed is a check for the following 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.

(a)	Asnis LLC	(b) Asnis LLC					
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ \-	, <u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) ork Rd, STE 7			
	122 N York Rd, STE 7		122 N York				
	Hatboro PA 19040	Hatboro PA 19040					
	05/26/2023		M23000007	292			
	Date of filing/registration in Florida	4.		Document n	umber		
(a)	VARGHESE, MARSHEL						
. (u)	Registered Agent and Registered Office shown on the records of th	e Florida	Dept. of Stat	e:			
	2234 TARRAGON LANE						
	Registered Office Address (MUST BE FLORIDA STREET A)	ODRESS	1	_			
	NEW PORT RICHEY .FL 3	4655					
(b)	Registered Agents Inc			-	TALI	2023 JUN	
	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	dress:	_	¥	Ĕ	
	7901 4th St N				HARY OF STATE AHASSEE, FLORIDA	12	<u> </u>
	NEW Registered Office Address:					7	
	STE 300		_	_	ORIO	9: 29	<u></u>
	St. Petersburg	3702			A	<u> </u>	
e cha gent v as/w ₂	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liabered street.	he registify controller the limited l	stered offic ompany, it i lited liabilit	e and the bus is hereby con ty company o	iness off firmed th	fice of at the	the register change(s)
Signa	ture of a member or authorized representative of a member	<u> </u>		Printed or typ	ed name o	f signee	<u>-</u>
rovis e obi mer	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I ha d in writing of this change.	erform för in (ance of my Chapter 60.	auties, and i 5. F.S. Or. if	am Jami this doc	uar w. ument	un ana acce is being file

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00