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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone : (323)962-8600

Fax Number : (323)389-0502

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

Email Address:___

LLC REGISTERED AGENT CHANGE **FNL TOUCH LLC**

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: FNL TOUCH LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Erik Treutlein	
Name of Person	
Legalzoom.com, Inc.	
Firm/Company	
11501 Domain Dr., Ste 200	
Address	
Austin, TX 78758	
City/State and Zip Code	
jose.sevilla@fntouch.net	
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this matter,	please call:
Erik Treutlein	800 773-0888 ext 9724
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 amount:
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

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)		(b)	
. (,	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10875 W 35TH WAY	30	27 69TH ST
	HIALEAH. FL 33018	W	OODSIDE, NY 11377
	01/08/2024	M24	4000001319
	Date of filing/registration in Florida	4.	Document number
. (a)	Registered Agent and Registered Office shown on the records of		
	Registered Agent and Registered Office shown on the records of ORLE SOLIS	of the Florida Dept.	, of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 10875 W 35TH WAY		2025
	HIALEAH I	., 33018	JUL 21 A
(b)	Enter name of NEW Registered Agent and/or NEW Registered	ed Office address:	2025 JUL 21 AM 10:
	UNITED STATES CORPORATION AGEN		M D: 22
	NEW Registered Office Address:		
	476 Riverside Ave.		
	Jacksonville F	32202	
ie chai gent w	imited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members cles of organization or the operating agreement of the Jose Sevilla	aws of the State of the registered liability compar s of the limited	e of Florida, it is hereby confirmed that after d office and the business office of the registe ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
ie artic			
ne artic S/ -	ure of a member or authorized representative of a member		Printed or typed name of signee