## M240000015C5

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



900432583689

TALLAHASSEE FLORIDA

94 JUL 10 PM 2:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED A'GENT 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)	4802 Lena Rd Unit 105, Bradenton, FL, 34211	(b) <sup>92</sup>	25 N. Lapeer Rd. Unit 193A Oxford, MI. 48371			
. (-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	1/16/2024		4000001505			
			·			
	Date of filing/registration in Florida	4.	Document number			
(a)						
		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	6707 RIVERSIDE DRPUNTA GORDA, FL 33982					
	Registered Office Address (MUST BE FLORIDA STREET					
	6707 RIVERSIDE DR					
	Punta Gorda	33982 L				
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Mariner Dock and Seawall	ed Office address	Σ:			
	NEW Registered Office Address:	<u></u>				
	4802 Lena Rd. Unit 105					
		T				
nange gent v as/we	4802 Lena Rd. Unit 105	aws of the State registered of lability compa of the limited	ffice and the business office of the registered iny, it is hereby confirmed that the change(s) liability company or as otherwise provided in			
nange gent v as/we	Bradenton  imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members	aws of the State registered of lability compa of the limited	ffice and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company.			

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

## 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.

	Lena Rd Unit 105. Bradenton, FL. 34211	(b)	925 N. Lapeer Rd. Unit 193A Oxford, MI. 48371
	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
1/16/2			24000001505
Iohnn	Date of filing/registration in Florida y Delacruz	4.	Document number
·)			<u> </u>
	ered Agent and Registered Office shown on the reco	rds of the Florida De	ept. of State:
6707	RIVERSIDE DRPUNTA GORDA, FL 33982		
-	ered Office Address (MUST BE FLORIDA STR RIVERSIDE DR	REET ADDRESS)	
Punta	Gorda	FI 33982	<del></del>
Jesus A	·	_,,	2024 JUL I
Enter na	ame of NEW Registered Agent and/or NEW Regis	stered Office addre	ess:
Marin	ner Dock and Seawall		
<u>NEW</u> I	Registered Office Address:	•	
4802 1	Lena Rd. Unit 105		1 2: 47
Brade	enton	, FL <sup>34211</sup>	
e or ena will be i ere auth	inges are made, the Florida street address of identical. Or, in the case of a Florida limit	of the registered of ed liability compoers of the limite	ate of Florida, it is hereby confirmed that after office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided willty company.
	2	Niklas (	Carey
	member or authorized representative of a member	<b>-</b>	

Signature of Registered Agent