M24000004118

(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.					
J. W.					
JAN 1 U 2025					
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date:	01/09/2025	
Name:	Cheyanne Davis	-
Reference #	2618115	_
Entity Name	FREEDOM HACK	ER MOVEMENT, LLC
_	es of Incorporation/Authorization	to Transact Business
∐ Amer	ndment	
✓ Chan	ge of Agent	
☐ Reins	statement	
☐ Conve	ersion	
☐ Merge	er	
☐ Disso	lution/Withdrawal	
☐ Fictition	ous Name	
Other	·	
Authorized A	Amount: \$25.00	
Signature: _	Orym Paire	



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	01/09/2025	
Name:	Cheyanne Davis	_
Reference #:	2618115	_
Entity Name:	FREEDOM HAC	KER MOVEMENT, LLC
Article	es of Incorporation/Authorization	n to Transact Business
Amen	dment	
✓ Chang	ge of Agent	
☐ Reins	tatement	
☐ Conve	ersion	
☐ Merge	er	
☐ Dissol	lution/Withdrawal	
Fictition	ous Name	
Other		
Authorized A	mount: \$25.00	
Signature:	Chyma Paire	

F: +852.2682.9790

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.

l.	N	ame of the limited liability company:		Freedom Ha	acker Movement, LLC
2.	(a)		_	(b)	A
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		21540 INDIAN BAYOU DR			21540 INDIAN BAYOU DR
		FORT MYERS BEACH, FL 33931	_		FORT MYERS BEACH, FL 33931
		4/5/2024			M24000004648
3.		Date of filing/registration in Florida	- 4.		Document number
5	(a)	Thomas U. Graner, Esq.			
٥.	(a)	Registered Agent and Registered Office shown on the records of	the Flo	orida Dept. of S	tate:
		1699			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_
		Federal Highway			
		Boca Raton , FL		33931	
		,,		<u>_</u>	1075 JAN -9 PH 5: 1
	(b)	Cogency Global Inc. Enter name of NEW Registered Agent and/or NEW Registered	069	address.	_
		Enter name of NEW Registered Agent and/or NEW Registered	Ome	<u>augress</u> :	
		115 North Calhoun Street, Suite 4			9.
		NEW Registered Office Address:	·		-
		Tallahassa		22204	_
		, FL		32301	<u> </u>
th ag w:	e cha ent v as/w e arti	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of inter-of-organization or the operating agreement of the	the rability of the	egistered off y company, i limited liabi	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in
		isti kandel	_		Kristi Kandel
	-	little of a thember or authorized representative of a member			Printed or typed name of signee
I pr th to no	here ovisi e obi mer itifie	by accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I i d in writing of this change.	ree to perfo d for hereb	act in this cormance of m in Chapter 6 y confirm the	apacity. I further agree to comply with the iy duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been
Si	gnatu	re of Registered Agent			