

M24000011239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

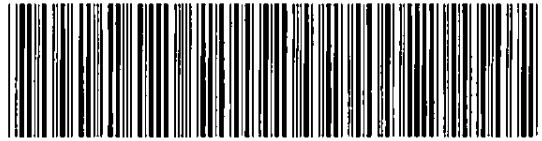
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

J.D  
NOV 18 2024

Office Use Only



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RECEIVED

2024 NOV 18 PM 12:01  
SECRETARY OF STATE  
TULALUMS COUNTY

FILED  
2024 NOV 19 AM 1:37  
SECRETARY OF STATE  
TULALUMS COUNTY



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

Account#: 1200000000088  
If there are any issues  
please contact Cheyanne at  
850-202-1882

Date: 11/18/2024

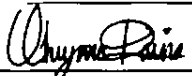
Name: Cheyenne Davis

Reference #: 2560423

Entity Name: STATE TAX SOLUTIONS, LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☒ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other \_\_\_\_\_

Authorized Amount: \$25.00

Signature: 

• CORPORATE HQ  
COGENCY GLOBAL INC  
10 E 40<sup>TH</sup> ST, 10<sup>TH</sup> FL  
NY, NY 10016  
D: +1.212.947.7200  
P: 800.221.0102  
F: 800.944.6607

• EUROPEAN HQ  
COGENCY GLOBAL (UK) LIMITED  
REGISTERED IN ENGLAND & WALES,  
REGISTRY #2010712  
6 LLOYDS AVE, UNIT 4CL  
LONDON EC3N 3AX  
+44 (0)20.3961.3080

• ASIA PACIFIC HQ  
COGENCY GLOBAL (HK) LIMITED  
A HONG KONG LIMITED COMPANY  
UNIT B, 11/F, LIPPO LEIGHTON TOWER  
103 LEIGHTON RD, CAUSEWAY BAY  
HONG KONG  
P: +852.2682.9633  
F: +852.2682.9790

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** State Tax Solutions, 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:

Jamie Hodges  
Name of Person

Firm/Company

1475 S. Price Rd.  
Address

Chandler, AZ 85286  
City/State and Zip Code

businessregistration@vensure.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jamie Hodges at ( 480 ) 500-8891  
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

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following 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.*

1. Name of the limited liability company: State Tax Solutions, LLC

2. (a) Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*

(b) Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*

1475 S. Price Rd.  
Chandler, AZ 85286

1475 S. Price Rd.  
Chandler, AZ 85286

3. 8/29/2024 Date of filing/registration in Florida

4. M24000011239 Document number

5. (a) Cogency Global Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

115 N. Calhoun St. #4  
Tallahassee, FL 32301

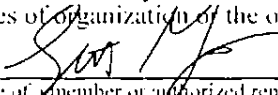
(b) Cogency Global Inc.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

115 North Calhoun Street, Suite 4  
NEW Registered Office Address:

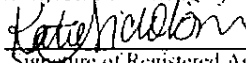
Tallahassee, FL 32301

FILED  
2024 NOV 19 AM 1:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

 Scott Guenther  
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.*

 Katie Nicholson, Assisant Secretary  
Signature of Registered Agent

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