

L24000192483705

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : INC AUTHORITY, LLC  
Account Number : I20240000004  
Phone : (775)329-7721  
Fax Number : (775)376-9207

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Email Address: arl\_30@hotmail.com

**LLC REGISTERED AGENT CHANGE  
URBANIZED CONCEPTION LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

K. SALY

JUN - 3 2024

**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: URBANIZED CONCEPTION 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)

3. 02/22/24 Date of filing/registration in Florida 4. L24000093705 Document number

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

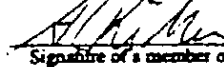
ALEXANDRE RICHER LEVASSEUR  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
13366 BRONZE AVE  
PORT CHARLOTTE, FL 33981

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

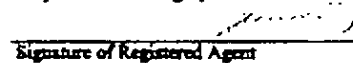
Inc Authority RA  
NEW Registered Office Address:  
390 North Orange Ave., Ste 2300-N  
Orlando, FL 32801

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TALLAHASSEE, FLORIDA  
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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.

 Signature of a member or authorized representative of a member Alexandre Richer Printed or typed name of signer

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.

 Signature of Registered Agent

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