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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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 NATALEE KIRSTEN SAFFRAN, PLLC

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K. SALY

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

(4)	nme of the limited liability company: Natalee			
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limit (Note: MAY BE POS	
	09/01/2018	 _ <u>L</u>	18000215185	
	Date of filing/registration in Florida	4.	Document number	
(a)	FRIEBIS, DANIEL S			
(,	Registered Agent and Registered Office shown on the records of	of the Florida D	ept. of State:	
	3890 TURTLE CREEK DRIVE			
	Registered Office Address (MUST BE FLORIDA STREE)	(<u>ADDRESS)</u>		22.
	SUITE B			聖
	PORT ORANGE F	_{1,} 32127		3/3/3/
(b)	Registered Agents Inc.			2022 JAH 31 PH 5: 17
()	Enter name of NEW Registered Agent and/or NEW Registered	ed Office addre	<u>ss</u> :	
	7901 4th St N			7
	NEW Registered Office Address:		······································	
	STE 300			
	St. Petersburg	33702		

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.

- Assistant Secretary

Printed or typed name of signee

Signature of Registered Agent

Signature of a member or authorized representative of a member

Bill Havre