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From:

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Account Number : I20090000081

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

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LLC REGISTERED AGENT CHANGE WORTH A READ TOO, LLC.

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JAN 15 2020



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 Na	ume of the limited liability company: Worth a	Rea	d Too	, LLC.	<u>-</u>		
2. (a)	6323 PIKETON ST		_(b) 6323	PIKETON S	Т.		
- . (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of (Note: MAY BI	limited liabilit		
	ORLANDO, FL 32810		<u>ORL</u>	ANDO, FL 32	2810	_	
	01/22/19		L1900	0022326			
3.	Date of filing/registration in Florida	4.		Document nur	nber		
5. (a)	RIVERA, SELYS			_			
	Registered Agent and Registered Office shown on the records of	of the Flor	ida Dept. of S	itate:			
	6323 PIKETON ST.			_	5EC	2020	
	Registered Office Address (MUST BE FLORIDA STREE)	<u>r add</u> re	<u>SS)</u>		CRETARY OF STATE FALLAMASSEE, FL	2020 JAN 14 AM 10:37	TAI NOT
	ORLANDO F	328.	10		RY OF	t AM	
(b)	Registered Agents Inc.	·	<u>.</u>		E, FL	<u>Θ</u>	
	Enter name of NEW Registered Agent and/or NEW Register	ed Office	address:		ਜ	7	
	7901 4th St N						
	NEW Registered Office Address:						
	STE 300		··-				
	St. Petersburg	_{L_337}	02				
the cha agent was/was/was/was/was/was/was/was/was/was/	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the re liability s of the l	gistered of company, imited liab	fice and the busin it is hereby confir ility company or a	ess office of med that the	the reg	gistered e(s)
	Ritury Tak ature of a member or authorized representative of a member		iley Park				
Signa	nture of a member or authorized representative of a member			Printed or typed	name of signer	2	

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.

Bill Havre - Assistant Secretary

Signature of Registered Agent