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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE RDG MANAGEMENT, LLC

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Mer 13, 2025 06.46 To: +18506176383 Page 2/2 Fax: 18134365206

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. N	ame of the limited liability company: RDG Managemen	t, LLC				
2. (a)			(b)			
()	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	1779 N University Drive, Suite 203		1779 N Unive	ersity Drive, Suite 203		
	Pembroke Pines Florida 33024		Pembroke Pir	nes Florida 33024		
	04/08/19		L19000096013			
3.	Date of filing/registration in Florida	4.	D	ocument number		
5. (a)	Kulhari, Vinod					
(-,	Registered Agent and Registered Office shown on the records of	ida Dept. of State:				
	1779 N University Dr.					
	Registered Office Address (MUST BE FLORIDA STREET)	<u>(22)</u>				
	#203		E3			
	Pembroke Pines , FL	33024				
(b)	Registered Agents Inc		TILLE BESTIAR 13 PH			
()	Enter name of NEW Registered Agent and/or NEW Registered	address:	P			
	7901 4th St N		3. 56			
	NEW Registered Office Address:		₹ 0			
	STE 300					
	St. Petersburg , FL	33702 				
the cha agent was/wi the arti- Cu-la Signa	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 lie ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the will be increased in the operating agreement of the increased the authorized representative of a member by accept the appointment as registered agent and agricular of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I have a change in the registered office address, I have a change in the registered of the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered of the proper and complete ligations.	the reability f the limited Ro	gistered office a company, it is h imited liability of liability company obin Jones Pact in this capace	nd the business office of the registered ereby confirmed that the change(s) company or as otherwise provided in any. rinted or typed name of signee ity. I further agree to comply with the		
ine ooi to mer notifie Md	g in writing of this change.			e limited liability company has been		

Signature of Registered Agent