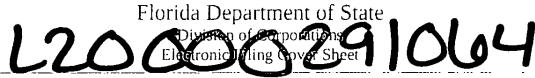
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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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## LLC REGISTERED AGENT CHANGE ALLY INVESTORS MW, LLC

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4/5/2024 11:12.5 PDT • To: 18506176383 Page: 2/2 Fax: 8134365206

## 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:	MW LLC	
2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET (DDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1211 N Westshore Blvd Suite 800	12	11 N Westshore Blvd Suite 800
	Tampa Florida 33607	Ta	mpa Florida 33607
	09/23/20	L204	000291064
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	LEGALING CORPORATE SERVICES INC.		
5. (a)	Registered Agent and Registered Office shown on the records		
	Registered Office Address (MUST BE FLORIDA STREE	T annessi	
	476 Riverside Ave.		
		00000	20
	Jacksonville	FL_32202	2024 NPR
(b)	Northwest Registered Agent LLC		
,,,	Enter name of NEW Registered Agent and/or NEW Register	red Office address	- · · · · · · · · · · · · · · · · · · ·
	7901 4th St N		PH 6:
	NEW Registered Office Address:		0.6
	STE 300		
	St. Petersburg	33702 F1.	
the chagent was/w the art Signa I here provis the obto mer	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited tere authorized by an affirmative vote of the member icles of organization or the operating agreement of the authorized representative of a member of authorized representative of a member of the appointment as registered agent and a close of all statutes relative to the proper and completely reflect a change in the registered agent as provided reflect a change in the registered office address, within a fifth change	of the registere liability comp is of the limited he limited liabi Nat Smit	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in flity company.  h  Printed or typed name of signee
nonge	rd in spitting of this change. Taylor Newman - Assistant	t Secretary	
Signati	ire of Registered Agent		