## Florida Departm (State) Division of Corporation Electronic Filing & Co., Shifet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220001132323)))



H220001132323ABCQ

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

SGI SEA YA, LLC

Certificate of Status

0

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2022 MAR 28 AM 10: 58
SECTION OF STATE
TALL ARASSEF, FLORIDA

" LEMIEUX

Electronic Filing Menu

Corporate Filing Menu

Help MAR 29 2022

## 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.

Name of the limited liability company: SGI Se	ea Ya, LLC
(a)	(b)
Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
7901 4th St N STE 300	7901 4th St N STE 300
St. Petersburg FL 33702	St. Petersburg FL 33702
03/04/21	L21000093305
Date of filing/registration in Florida	4. Document number
(a) STEVE M WATKINS, III	
Registered Agent and Registered Office shown on the recor	rds of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STR	'EET ADDRESS)
41 COMMERCE ST	
APALACHICOLA	_, <sub>FL</sub> _32320
Northwest Registered Ager	nt LLC
Enter name of NEW Registered Agent and/or NEW Regis	stered Office address:
7901 4th St N	FILED Stered Office address:  FILED Stered Office address:
NEW Registered Office Address:	
STE 300	D . FLOR
St. Petersburg	_, <sub>FL</sub> 33702
change or changes are made, the Florida street addresses will be identical. Or in the case of a Florida limit	
· longon , lotte	Morgan Noble  Printed or typed name of signee
ignature of a member or authorized representative of a member	ad agree to act in this capacity. I further agree to comply with

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 my ified in writing of this change.

Tom Glover - Assistant Secretary

Signature of Registered Agent