Florida Department of State Division of Compositions

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

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

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 **HETTRUMER LLC**

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

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Mar 19, 2029 01:22 . 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: HETTRUMEF	RLLC		
2. (a)	7901 4th St N	(b) 870 NORTH MIRAMAR AVENUE		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	!	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	STE 300		INDIALA	ANTIC, FL 32903
		_	<u> </u>	
	St. Petersburg, FL 33702	_		
	04/05/2021	_	L21000	156944
3.	Date of filing/registration in Florida	4.		Document number
5. (a	LEGALINC CORPORATE SERVICES INC.			
U. (u.	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			- e:
	476 RIVERSIDE AVE.			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-
	JACKSONVILLE .FL	22202	······································	
	JACKSONVILLE , FL	32202	<u> </u>	2025
(b)	Northwest Registered Agent LLC			APPRO ARI FILE 2025 HAR 19
(6)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			
	7901 4th St N			
	NEW Registered Office Address:			<u> </u>
	STE 300			
	Ct. Batasahara	00700		
	St. Petersburg , FL	33702		-
the ch agent was/w	limited 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 lia were authorized by an affirmative vote of the members o ticles of organization or the operating agreement of the	the regist bility confitted fithe lim	stered office ompany, it is nited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
ΔV	W Smith			Nat Smith
-	ature of a member or authorized representative of a member			Printed or typed name of signee
provis the ob to mer	eby accept the appointment as registered agent and agri- sions of all statutes relative to the proper and complete digations of my position as registered agent as provided rely reflect a change in the registered office address, I red an writing of this change.	ee to act perform I for in (nereby c	t in this cap ance of my Chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signati	Taylor Newman - Assistant Secreta	ary		