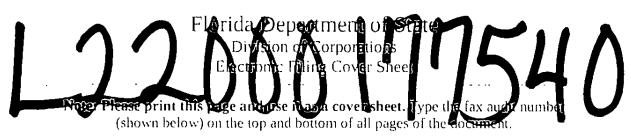
Division of Corporations



(((H24000100434 3)))



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To:		
	Division of Corporations	
	Fax Number : (850)617-6383	: `
From:		.•
	Account Name : REGISTERED AGENTS INC.	••
	Account Number : 120090000081	1,
	Phone : (307)200-2803	:
	Fax Number : (813)436-5206	_

EnterShe email address for this business entity to be used for future mail a modern and mac and the same of the same o

## LLC REGISTERED AGENT CHANGE RB-2-B L.L.C.

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

M. SOLOMON MAR 1 5 2024

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## 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.

	ame of the limited liability company:				
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	04/13/2022	L22000177 -			
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	ZENBUSINESS INC.			<b>~3</b>	
	Registered Agent and Registered Office shown on the records of			2024 11 18	
	336 E. COLLEGE AVE.			7	
	Registered Office Address (MUST BE FLORIDA STREET)		15		
	SUITE 301		•••		
	TALLAHASSEE, FL	32301	*!	PH 4:	
(b)	Registered Agents Inc  Enter name of NEW Registered Agent and/or NEW Registered  7901 4th St N	Office address:	_		
	NEW Registered Office Address:		_		
	STE 300		·		
	St. Petersburg, F1,	33702	_		
the changent was/withe art	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 lia- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the $\frac{1}{7}$	the registered office the litty company, it is the limited liability.	te and the business office of the is hereby confirmed that the cha ty company or as otherwise pro	registered ange(s)	
	due of a member of authorized representative of a member		Printed or typed name of signee		
Signa	•			lu with the	
There provis the ob- to mer	by accept the appointment as registered agent and agrions 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. If d in writing of this change.	verformance of my	duhes, and Lam familiar with c	and accept	