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Givision of Corporations

Fax Number (258)617-6383

From

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 : (307)200-2803 Phone Fax Number : (813)436-5205

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1/29/2024 09:J9:33 PST To 18506176383 Page: 2/2 Fax: 8134365206 From: Registered Agents Inc.

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

(a)		(b)					
(11)	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)	(0,		dailing address of limit (<u>Note: MAY BE POS</u>	eđ liabilit	compa	iny:
	07/05/22		20002993	38			
	Date of filing/registration in Florida	4.		Document number			
	Roberts, David						
(a)	Registered Agent and Registered Office shown on the records of						
	•						
	7901 4th St N STE 300						
	7901 4th St N STE 300 Registered Office Address (MUST BE FLORIDA STREE	<u>(ADDRESS)</u>			SEC	202 ¹	
					SEÓNG M TALLAH	2024 JAN 2	
(اء)	Registered Office Address				SEÜNDIARIT Ü TALLAHASS	2024 JAN 29 A	-
(b)	Registered Office Address	L_33702	<u> </u>		SEÜNGLAR TÜR S TALLAHASSEE		<u> </u>
(b)	Registered Office Address (MUST BE FLORIDA STREE St. Petersburg .] Registered Agents Inc	L_33702	<u> </u>		SECNALIANT OF STATE	2024 JAN 29 AM 11:28	
(b)	Registered Office Address (MUST BE FLORIDA STREE St. Petersburg) Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Register	L_33702	<u>ess</u> :		SECNOPART OF STATE		<u> </u>
(b)	Registered Office Address (MUST BE FLORIDA STREE St. Petersburg) Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Register 7901 4th St N	L 33702 ed Office addro	<u> </u>		SECTABLE OF STATE		; ·

the articles of organization or the operating agreement of the limited liability company.

Cabbon Turner	Robin Jones
Signature of a member or authorized representative of a member	Printed or typed name of signee

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 notified in writing of this change.

David Roberts - Assistant Secretary

Signature of Registered Agent