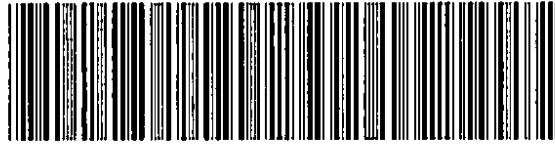


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FILED

2022 SEP 20 AM 10:43

SECRETARY OF STATE

2022 SEP 20 AM 11:14

SECRETARY OF STATE

MAIL ROOM

A. BUTLER

SEP 21 2022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 962407 4803290
AUTHORIZATION : *Sydney Coleman*
COST LIMIT : \$ 25.00

ORDER DATE : September 19, 2022
ORDER TIME : 9:55 AM
ORDER NO. : 962407-005
CUSTOMER NO: 4803290

CHANGE OF AGENT

NAME: XGRASS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS: _____

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. Name of the limited liability company: XGRASS, LLC

2. (a) _____ (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

205 BORING DR.
DALTON, GA 30721

205 BORING DR.
DALTON, GA 30721

11/22/2019

M19000011239

3. 11/22/2019 Date of filing/registration in Florida

4. M19000011239 Document number

5. (a) _____
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

WILL LAMBERT

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

5846 100th Ave E

PARRISH, FL 34219

FILED
 2022 SEP 20 AM 10:43
 RECORDS OF STATE
 TALLAHASSEE, FL

(b) _____
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

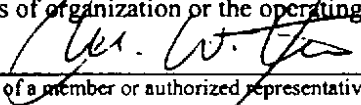
Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

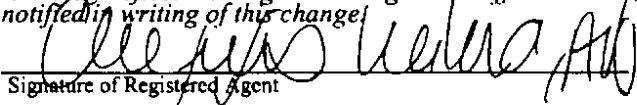


Miroslaw Wojtowicz

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!



Signature of Registered Agent

**Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
 FILING FEE: \$25.00**