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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195							
REFERENCE : 355425 4371937							
AUTHORIZATION : Spelle de man							
COST LIMIT : \$ 25.00							
ORDER DATE : December 30, 2021							
ORDER TIME : 4:13 PM							
ORDER NO. : 355425-035							
CUSTOMER NO: 4371937							
CHANGE OF AGENT							
NAME: OFFICE PRIDE, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON: Eyliena Baker							

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.

2. (a)	(b)							
- . (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(\		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) AKE RD., STE, 200				
	3450 E. LAKE RD., STE. 200		3450 E. L					
	PALM HARBOR, FL 34685	_	PALM HA	RBOR, FL 34685				
	12/08/2021		M21000016598					
3.	Date of filing/registration in Florida	4.		Document nu	ımber			
(b)	Registered Agent and Registered Office shown on the records of C T CORPORATION SYSTEM Registered Office Address (MUST BE FLORIDA STREET) 1200 SOUTH PINE ISLAND ROAD PLANTATION	33324	5)		STARY OF ST	7022.111 - 3 AH 10: 28		
	1201 Hays Street				F H	28		
	Tallahassee, FI	32301						
change agent v was/wo	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registere ability co of the lim	ed office and impany, it is lited liability	I the business hereby confi company or	office of rmed that	the reg	gistered nange(s)	
	/s/ David Gershman		•	n, Authorized	Person			
Signa	ture 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