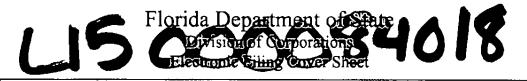
Division of Corporations



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(((H23000213681 3)))



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From:

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Account Number : 076424003301

Phone : (813)223-7474 Fax Number : (813)227-0435

22-2459/SSH

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

tgood@trenam.com

Email Address:

LLC REGISTERED AGENT CHANGE

THE HEALTH HERO FLORIDA FUND, LLC

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JUN 1 5 2023 K Brumble

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: The Health He | ero Florida | Fund, LLC | · | | |
|-------------------------------|---|---|--|---|---|---|
| 2. (a) | | | (b) | | | |
| -, (-) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | (0) | Mailing address of limi | • | |
| | 1311 N. Westshore Boulevard, Suite 101 | | 1311 N. | Westshore Boulevard, | Suite 101 | |
| | Tampa, FL 33607 | | Tampa, F | FL 33607 | | |
| | 05/12/2015 | | L15000084 | 4018 | | |
| 3. | Date of filing/registration in Florida | 4. | | Document number | <u> </u> | |
| 5. (a) | Trenam Law | | | | | |
| J. (a) | Registered Agent and Registered Office shown on the records | of the Flor | da Dept. of Sta | nte: | | |
| | 101 E. Kennedy Boulevard | | | | | |
| | Registered Office Address (MUST BE FLORIDA STREET | ET ADDRE | <u>SS)</u> | _ | | |
| | Suite #2700 | | | | | |
| | Tampa | 33602 | | _ | | |
| | | FL | | _ | | |
| (b) | TK Registered Agent, Inc. | | | | | |
| , | Enter name of NEW Registered Agent and/or NEW Registered Office address: | | _ | 20: | | |
| | | | | | 2023 JULI 1 4 | |
| | 101 E. Kennedy Boulevard | | | _ | = | |
| | NEW Registered Office Address: | | | | <u>+</u> | ::- |
| | Suite 2700 | | | <u></u> | 70 114 | |
| | | | | | | |
| | Tampa | FL_33602 | | _ | 2 | |
| change agent v was/w | imited liability company is not organized under the or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member cles of organization or the operating agreement of the | the registe l liability or s of the li | red office ar company, it : mited liabili | nd the business offici is hereby confirmed ty company or as of | e of the regitation that the cha | istered inge(s) |
| | ense Chiller | Th | omas Wallac | | | |
| - | ture of a member or authorized representative of a member | | | Printed or typed name | _ | |
| provisi the obl to meri | by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provi ely reflect a change in the registered office address, I in writing of this change. | ngree to a lee perform ded for in I hereby | ct in this cap nance of my Chapter 60, confirm that | pacity. I further agre duties, and I am fan 5, F.S. Or, if this do the limited liability | ee to comply niliar with a ocument is b company ho | v with the and accept eing filed as been |
| | re or Kepistered Agent | | | | | |