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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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## LLC REGISTERED AGENT CHANGE 511 GROUP, LLC

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M. SOLOMON

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2/22/2024 08:13.22 PST- To 18506176383 Page: 2/2 From Registered Agents Inc Fax: 8134365206

## 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 Standes, the undersigned limited hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

L. Na	ame of the limited liability company. 511 GROUP	P, LLC					
2. (a)	Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited	Mailing address of fimited liability company: (Note: MAY BE POST OFFICE BOX)			
	03/27/2013	<u>M13000</u>					
3.	Date of filing/registration in Florida	4.	Document number				
5. (a)	BRAVO, JASON R		, A AM A 400 4 44				
	Registered Agent and Registered Office shown on the record	ds of the Florida Dept, of	'State'				
	368 Minorca Square						
	Registered Office Address (MUST BE FLORIDA STRI	EET ADDRESS)	<del></del>		2		
	Corat Gables				2024 F		
	MIAMI				₹E8 2	****	
				<u>;</u> •	2	; [ ]	
-	Registered Agents Inc			•	70	j i	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>	tered Office address:			H :21 H	į.	
				بنبن	<u>+</u> -		
	7901 4th St N NEW Registered Office Address:						
	STE 300		<del></del>				
	St. Petersburg	. F1, 33702					
the cha agent v was/we the arti	imited liability company is not organized under the single or changes are made, the Florida street addressill be identical. Or, in the case of a Florida limited at the case of a Florida limited authorized by an affirmative vote of the membicles of organization or the operating agreement of	he laws of the State of ss of the registered of ed liability company, ers of the limited liab	ffice and the business off it is hereby confirmed the offity company or as othe	fice of the rat the ch	e registi ange(s)	ered )	
<u>:</u>	ture of a nember or authorized representative of a member	Robin Jones	D	ľ			
I here provisi the obl to mere	ture of a member of authorized representative of a member by accept the appointment as registered agent and fons of all statutes relative to the proper and compligations of my position as registered agent as pro- ely reflect a change in the registered office addres d in writing of this change.	Lagree to act in this pleic performance of vided for in Chapter is, Thereby confirm t	Pinted or typed name of capacity. I further agree my duties, and I am fant 605, F.S. Or, if this does hat the limited hability ea	to coma	ly with and ac- being fi tas bee.	the cept iled n	
	{ \rank_P \chi_{\text{total}} \chi_{tota	int Secretary					
	wol Registered Agent	-					