I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JACQUELINE MARIE PLANK

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: NOT APPLICABLE

Current Principal Place of Business:

Name and Address of Current Registered Agent:

PLANK, JACQUELINE 35805 STATE ROAD 70 EAST MYAKKA CITY, FL 34251 US

DOCUMENT# L21000337698

35805 STATE ROAD 70 EAST MYAKKA CITY, FL 34251

Current Mailing Address: 35805 STATE ROAD 70 EAST MYAKKA CITY, FL 34251 UN

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

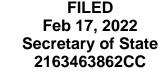
Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	PLANK, JACQUELINE M	Name	PLANK, JACQUELINE M
Address	35805 STATE ROAD 70 EAST	Address	35805 STATE ROAD 70 EAST
City-State-Zip:	MYAKKA CITY FL 34251	City-State-Zip:	MYAKKA CITY FL 34251

02/17/2022 MGR

Entity Name: ARC BEAUCERONS AND TRAINING CENTER LLC

Certificate of Status Desired: No



Date

Date