(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



900376927479

Y SULKER DEC 1 5 2021

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

Phone: 850-558-1500								
ACCOUNT NO. : I20000000195 REFERENCE : 328467 5132487 AUTHORIZATION : Surebleman COST LIMIT : \$.35.00								
December 14, 2021								
10:57 AM								
328467-010								
5132487								
CHANGE OF AGENT								
ROCKIN LABYBUG, INC								
_	ACCOUNT NO. : I20000000195 REFERENCE : 328467 5132487 AUTHORIZATION : Free State S							

PLEASE	RETURN	THE	FOLLOW.	ING AS	PROOF	OF	FILING:		
XX	CERTIE PLAIN		COPY MPED COI	?Y					
CONTACT	PERSON	J: H	Eyliena	Baker					
				EXA	MINER'	S	INITIALS:		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502 nge is submitted for a corporat r to change its registered office	ion organized under the la	ws of the State of <u></u>	Delaware
	he corporation: ROCKIN LAD		m, m me siate oj r	ortaa,
	office address: 6747 Forest Hi		FL 33413	
3. The mailing a	ddress (if different): PO Box 1	52725, Cape Coral, FL 33	915	
4. Date of incorp	oration/qualification: Februar	y 10, 2017 Document	number: <u>F170000</u>	00652
5. The name and	street address of the current re tment of State: (If resigned, ent	gistered agent and registere	ed office on file wit	h the
	Williams, Nicole			
	1412 NW 1st Terr			
	Cape Coral	FL	33993	
6. The name and (if changed):	street address of the new regis	tered agent (if changed) an	d /or registered offi	ce
	Corporation Service Compar	у		<u>:</u>
	1201 Hays Street		-	
		P.O. Box NOT acceptable		The state of the s
	Tallahassee	FL	32301	港工作
The street addre as changed will	ss of its registered office and t be identical.	he street address of the bu	siness office of its	registered agent.
Such change wa authorized by th	s authorized by resolution dul e board, or the corporation ha:)	y adopted by its board of or s been notified in writing of	lirectors or by an cof the change.	officersof ?
X	rie E. agni	Jill Cilmi		Vice President
- (of an officer or director		ed or typed name and title	
oj my auties, and document is beir corporation has	the appointment as registered of comply with the provisions of I am familiar with and accepts filed merely to reflect a chaben notified in writing of this Service Company	n the obligation of my pos nge in the registered offic	this capacity. e proper and compition as registered e address, I hereby	plete performance agent. Or, if this confirm that the
By: Aindrey	M Baronie	<u> </u>	12/14/2021	
Lindsey M. Baron	ature of Registered Agent nie, Assistant Vice President		Date	
If signing on bel	nalf of an entity:			
Ty	ped or Printed Name			

* * * FILING FEE: \$35.00 * * *