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COVER LETTER

TO: Amendment Section Division of Corporations

THE FIRM (TN), INC.

SUBJECT: _____

F17000005672

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Castillo

DOCUMENT NUMBER:

Name of Contact Person

Registered Agent Solutions, Inc.

Firn/Company

Corporate Center One, 5301 Southwest Pkwy, Ste 400

Address

Austin, Texas 78735

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Castillo

Name of Contact Person

at (<u>888</u>)<u>705-7274</u> Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Tennessee _ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of t	he corporation: THE FIRM (TN)), <u>INC.</u>				_
2. The principal	office address: 7901 4th St N S	TE 30	0			-
	burg, FL 33702					_
3. The mailing a	ddress (if different):	_		<u> </u>		_
4. Date of incorporation/qualification: <u>12/18/2017</u> Document number: <u>F1700</u>					0005672	
	street address of the current registered timent of State: (If resigned, enter resi	-	and registered	l office on file wi	ith the	
	NORTHWEST REGIS	TER	ED AGE	NT, LLC	_	
	7901 4TH STREET NORTH		SUITE 300			
	ST. PETERSBURG,		FL	33702	2022 JUN 27 SECRETAL	
6. The name and street address of the new registered agent (if changed) and /or registered office						
Registered Agent Solutions, Inc. 33여 포						C
	155 Office Plaza Dr.		Suite A		ESTA S) -
P.O. Box NOT acceptable Tallahassee FL 32301						-
	Tallahassee	ΓL	32301			

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Basi Hoston /s/

Signature of an officer or director

Bari Horton

Co-Chief Executive Officer

06/27/2022

Printed or typed name and title

Date

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. Thereby confirm that the corporation has been notified in writing of this change.

Hodenziet

Signature of Registered Agent

If signing on behalf of an entity:

Mackenzie Hart, Assistant Secretary

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)