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From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

S CHATHAM

AUG - 7 2025

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

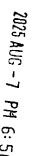
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REGISTERED AGENT CHANGE LEO@CYPRESS CREEK GP, INC.

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Help



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

	•	17.0502, 607.1508, or 617.1508, Florida $\$$ organized under the laws of the State of $rac{1}{2}$			
		registered agent, or both, in the State of F			
1. The name of t	he corporation: LEO@CYPRESS	CREEK GP, INC.			
2. The principal	office address: 17501 BISCAYNE	BOULEVARD STE 300 , AVENTURA, FL	33160		
4. Date of incorp	poration/qualification: 03/16/2022	Document number: F2200000)1565		
	I street address of the current regist tment of State: (If resigned, enter t	tered agent and registered office on file wiresigned)	th the		
	KO Lawyers		_		
	221 S Andrews Avenue		202		
	FORT LAUDERDALE, FL 33301		<u> </u>	2025 AUG - 7	*==
(if changed):			AH e SSE	3-7 PM	ا روان روان
	Corporate Creations Network Inc.		,	€: 1	C
	801 US Highway 1		<u>-</u>	: 56	
		P.O. Box. NOT acceptable	•		
	North Palm Beach, FL 33408		-		
The street addre	ss of its registered office and the be identical.	street address of the business office of its	s registe	ered ag	ent,
Such change wa authorized by th	is authorized by resolution duly a board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer .	so	
Lower	Pengo Co	Teresa Temple, Attorney-in-Fact			
	re of an officer or director	Printed or typed name and til	le		
) further agree to of my duties, an locument is beil corporation has	o compty with the provisions of a d I am familiar with and accept ti ng filed merely to reflect a chang been notified in writing of this ci	ent and agree to act in this capacity. Il statutes relative to the proper and com he obligation of my position as registerea e in the registered office address, I hereb hange.	plete po Lagent, ly confi	erforma Or, if rm that	ance this the
Signature of Registered Agent		08/07/2025			
Sign	nature of Registered Agent	Date			_
f signing on be	half of an entity:				
By: Teresa Temp	de, Special Secretary				
Typed or Printed Name					

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