- Hage: 2 of 3

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	Account Number	: FCA00000023	2021					
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LLC REGISTERED AGENT CHANGE FIREHOUSE SUBS, LLC

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

1. No	ame of the limited liability company:	I.I.C					
2. (a)			(b)				
	Principal office address of limited liability company: (<u>Note:</u> MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)				
	12735 Gran Bay Parkway, Suite 150		12735 Gran Bay Parkway, Suite 150				
	Jacksonville, FL 32258		Jacksonville, FL 32258				
	12/04/2001		1.010000208	39			
3.	Date of filing/registration in Florida	4.	<u> </u>	Document number			_
5. (a)	Cogency Global Inc.						
	Registered Agent and Registered Office shown on the records of	the Flor	ida Dept. of State	::			
	Registered Office Address (MUST BE FLORIDA STREET	Ţ	Ā	~3			
	115 North Calhoun Street, Ste. 4			021			
	Tallahassee FI	AHAS	LLAHASSE	2021 OEC 22			
	C T Corporation System				SET.	22	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	, FLORIDA	UF STATE E. FLORIDA	PH 2: 38			
	NEW Registered Office Address:		···. ·. ·				
	1200 South Pine Island Road						
	Plantation FI	33324					
the cha agent v was/wa	imited liability company is not organized under the latinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members lieles of organization or the operating agreement of the M_2 . Here,	f the rej iability of the li : limited	gistered office company, it is inited liability	and the business office thereby confirmed the company or as other	ce of the r at the char	egister igc(s)	
Signa	ture of a member or authorized representative of a member			Printed or typed name of :	signee		
provisi the obl to mere notifiee	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I i in writing of this change.	ree 10 a e perfor ed for in hereby	ict in this cape mance of my c i Chapter 605 confirm that i	icity. I further agree i luties, and I am famili , F.S. Or, if this docu the limited liability co.	to comply iar with a ment is he mpany ha	with th td acco ing file s heen	he ept ed
By: Signatu	re of Registered Agent	v7 -	Kaity To Secreta	xon, Asst ry			
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