Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L05000007039

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Division of Corporations
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Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.
Account Number : 073222003555
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Email Address: bmann@nasonyeager.com

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LLC REGISTERED AGENT CHANGE
PERFORMANCE PACKAGING, LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	$25.00

OCT 10 2022

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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. Name of the limited liability company: PERFORMANCE PACKAGING, LLC

2. (a) 200 NW Avenue L., Belle Glade, FL 33430
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) P.O. Box 2048, Belle Glade, FL 33430
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 01/24/2005
Date of filing/registration in Florida

4. L05000007039
Document number

5. (a)
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Nowicki, Mark J.

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

480 Maplewood Drive, Suite 2

Jupiter, FL 33458

(b) Nason, Yeager, Gerson, Harris & Fumero P.A.
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Terrence Freeman II

NEW Registered Office Address:

3001 PGA Blvd., Suite 305

Palm Beach Gardens, FL 33410

2022 OCT 12 AM 11:13

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Paul Allen, Manager of H&A Mgmt, LLC, Its Manager
Printed or typed name of signer

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: $25.00

INHS18 (2/14)