Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000275006 3)))



H2400027500634BC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

Email Address:_

LLC REGISTERED AGENT CHANGE CADMUS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2024 AUG 1 6 PH 12: 33

777750750

3/16/2024 05:57:38 PDT • To 13506176383 Page, 2/2 Fax, 8134365206

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.

L Na	ame of the limited liability company: CADMUS, ELC		
2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: <u>(Note: MAY BE POST OFFICE BOX)</u>
	09/21/2005		093231
3.	Date of fifing/registration in Florida	4.	Document number
	NRAI SERVICES INC	••	Total Marine.
5. (a)	Registered Agent and Registered Office shown on the records of 1200 South Pine Island Road Registered Office Address (MUST BE FLORIDA STREET)	the Florida Dept, of	
	Plantation . F.I.	33324	
	REGISTERED AGENTS INC		20"
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	. — 24 24 24 25 24 25 25 25 25 25 25 25 25 25 25 25 25 25
	7901 4TH ST N		APPRIO PILE 2024 AUG 1 6
	NEW Registered Office Address		PR DOVE
	STE 300		
	ST. PETERSBURG , FI.	33702	^{ႏို} . ယ ယ
change agent v was/we the arti	imited liability company is not organized under the lay e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- cre authorized by an affirmative vote of the members of teles of organization or the operating agreement of the	registered office ability company, of the limited liab	and the business office of the registered it is hereby confirmed that the change(s) dility company or as otherwise provided in
<u> </u>	for the formula in the formula of a member	Robin Jones	
			Printed or typed name of signee
provisi the obl to mero notifice	hy accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I I d'in writing of this change.	vec to act in this e performance of i d for in Chapter (vereby confirm th	capacity. I further agree to comply with the ny duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed act the limited liability company has been
	면 (급한다) David Roberts		
Signatu	re of-Registered Agent		