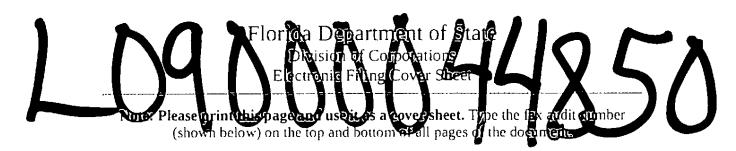
To: 18506176383 Page: 1/2 Fax: 8134365206 10/30/2024 05:43:49 PDT



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

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Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE C & R CONSULTING LLC.

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M. SOLOMON

OCT 3 1 2024

10/30/2024 05:43:49 PDT To: 18506176383 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 N	lame of the limited liability company: C&R CONSU	ILTING LLC.						
2 (a)	(b) 7901 4th St N STE 300 (b) 7901 4th St N STE 300							
(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company; (Note: MAY BE POST OFFICE BOX)					
	St. Petersburg FL 33702	<u>St. P</u>	Petersburg FL 33702					
	05/08/2009		00044850					
3.	Date of filing/registration in Florida	4.	Document number					
5. (a	; FAROOQ, FRASAT							
<i>2.</i> (11)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
	10030 SW 147 CT	φ 2						
	Registered Office Address (MUST BE FLORIDA STREE							
			2024 OCT 30					
	MIAMI	FL_33196	<u> </u>					
			က်ချော် များ ကြို့တွင် ကြော					
	Enter name of NEW Registered Agent and/or NEW Register							
	7901 4th St N							
	NEW Registered Office Address:							
	STE 300		- 					
	St Petersburg , I	FL 33702						
	at : etersoning	11. 007.02						
the chagent was/v	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the case.	of the registered I liability compan rs of the limited li	office and the business office of the registered y, it is hereby confirmed that the change(s) lability company or as otherwise provided in					
1	Out Country	Nat Smith						
Sign	ature of a member or authorized representative of a member	149(\$1110)	Printed or typed name of signee					
I here provi. the ob- to me notifie w///	why accept the appointment as registered agent and a sions of all statutes relative to the proper and comple oligations of my position as registered agent as provi- vely reflect a change in the registered office address, ad in writing of this change.		is capacity. I further agree to comply with the of my duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed a that the limited liability company has been					
	Toylor Tottlinen 7.0000tani	t Secretary						
Stenat	ure of Registered Agent							