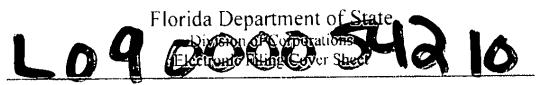
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Division of Corporations



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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

\*\*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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## LLC REGISTERED AGENT CHANGE 1915 SOUTH ADVERTISING, LLC

| Certificate of Status | 0       |
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K. SALY JUL - 8 2022

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From: Lexus Wingo

## 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. N                               | ame of the limited liability company:  | PERT                     | IŞIN               | G, LLC  |   |
|------------------------------------|--|--------------------------|--------------------|---|---|
| 2. (a)                             | No Change  |                          | (b)                | No Change   | e   |
| <b>Σ.</b> (Δ)                      | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  | <b></b>                  | -                  | 1   | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)  |
| 3.                                 | 06/04/2009  Date of filing/registration in Florida   | 4.                       | L<br>—             | 190000542   | Document number   |
| 5. (a`                             | REGISTERED AGENT SOLUTIONS, INC.   |                          |                    |   |   |
| 5. (a)                             | Registered Agent and Registered Office shown on the records of the Florida Dept. of State 155 OFFICE PLAZA DR  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  |                          |                    |   | 2022 JUL -7   |
|                                    | STE A  |                          |                    |   |   |
|                                    | TALLAHASSEE , FL 32  |                          |                    |   |   |
| (b)                                | C T Corporation System   |                          |                    |   | SSET  |
| (0)                                | Enter name of NEW Registered Agent and/or NEW Registered (   | Office                   | addy               | <u>ess</u> :  | PH IN 17  |
|                                    | NEW Registered Office Address:   |                          | _                  |   | _   |
|                                    | 1200 South Pine Island Road  |                          |                    |   | <u>.</u>  |
|                                    | Plantation , FL  | 33324                    | i<br>              | ····  | -   |
| the chagent                        | limited liability company is not organized under the law tange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the  | the reality f the limite | cor<br>limited lia | ipany, it i<br>ed liabilit<br>ibility cor           | is hereby confirmed that the change(s) by company or as otherwise provided in inpany.   |
|                                    | <u> </u>   | _                        | HAI                | FITZGE  | RALD, CFO   |
| I her<br>provi<br>the oil<br>to me | where of a member or authorized representative of a member above accept the appointment as registered agent and agrees ions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address. I have a complete the converting of this change of the change | for i                    | in Ci              | n this cap<br>nce of my<br>napter 60.<br>nfirm that | Printed or typed name of signee pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been |
|                                    | ture of Registered Agent   |                          |                    |   |   |