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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010

[**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 POP SELLS, LLC

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T. LEMIEUX APR 19 2023

Help

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 Hability company submiss the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	Pop	Sells,	. LL	C				
	and of the finited flatinty company.							
2. (a)	Principal office address of limited liability con (Nate: MUST BE STREET ADDRESS		(b)					
	5717 Bessie Drive	_	5717 Bessie Drive					
	Sarasota FL 34233		Sarasota FL 34233					
	07/06/09			L0900	006497	1		
3.	Date of filing/registration in Florida	ł	4.		Document nu	ımber		
5. (a)	BUSSIE, GOODWIN							
` '	Registered Agent and Registered Office shown on the	records of the	e Florio	la Dept, of Sta	te:			
	Registered Office Address (MUST BE FLORIDA	STRFFT AI	MRES	· · · · · · · · · · · · · · · · · · ·	_			
	5717 Bessie Drive	<u> </u>	**********					
	SARASOTA	FI	3/12	33	_			
(h)	Northwest Registered Ag			ddwnee		-		
	Enter name of NEW Registered Agent and/or (NEW)	negistereo c	milea	nuress.	•	~ · :	2023	
	7901 4th St N				_	•	<u>د</u> . د	
	NEW Registered Office Address:						_ သ	,=-
	STE 300				****	•	-D -TS	
	St. Petersburg	₁₁ 3	3370	2				
the changent was/w	limited liability company is not organized und ange or changes are made, the Florida street awill be identical. Or, in the case of a Florida lere authorized by an affirmative vote of the micles of organization or the operating agreeme	der the laws ddress of the limited liab nembers of	s of th he reg sility o the li	e State of F istered offic company, it nited liabili	te and the busing is hereby confi ty company or	ness off rmed tl	— nfirmed fice of the hat the c	he registered hange(s)
	ature of a member or authorized representative of a mem				NAT SMI			
				. ,.	Printed or typed		_	1 2.7 .1
provis the ob to mer	by accept the appointment as registered agen ions of all statuaes relative to the proper and a ligations of my position as registered agent as ely reflect a change in the registered office ad d in writing of this change.	complete p s provided ddress, I hè	erjori for in creby	nance of my Chapter 60 confirm tha	aduties, and La	ım tamı	'uar wil	n ana accept
~ / v-	Taylor Newman - Δ	Assistant	oecr	elary				

Signature of Registered Agent