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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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.\*\*

| ا .                          | Email Address:                |         | <u></u> | ~2                                      |
|------------------------------|-------------------------------|---------|---------|---|
| <del>-</del><br><del>:</del> |                               |         |         | 2023                                    |
| -                            | LLC REGISTERED ACCURATE PROPE |         |         | JAN 31 A                                |
|                              | Certificate of Status         | 0       | (j.     | · 至 ` · · · · · · · · · · · · · · · · · |
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|                              | Estimated Charge              | \$25.00 |         |   |

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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 605,6114 or 605,0116. Florida Statutes, the undersigned limited hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| (h)                               |   |  |
|-----------------------------------|---|--|
|                                   |   |  |
|                                   | Mailing address of limited liability company.  (Note: MAY BE POST OFFICE BOX)   |  |
|                                   |   |  |
| LOS                               | L09000067611  |  |
| 4.                                | Document number   |  |
|                                   |   |  |
| f the Florida Dept.               | of State.   |  |
|                                   |   |  |
| (ADDRESS)                         |   |  |
| <sub>I.</sub> 33404               |   |  |
| , Northwest Registered Agent LLC  |   |  |
| d Office address:                 |   |  |
|                                   | JA#31 A#11:   |  |
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| 33702                             | 37  |  |
| of the registered iability compar |   |  |
| Nat Sm                            | Printed or typed name of signee   |  |
| 1 1 1                             | f the Florida Dept.  [ADDRESS]  [ADDRESS]  [ADDRESS]  [ADDRESS]  [ADDRESS]  [ADDRESS]  [ADDRESS]  [ADDRESS]  [ADDRESS]  [ADDRESS] |  |

Signature of Registered Agent

Taylor Newman - Assistant Secretary