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T. LEMIEUX AUG 1 3 2022

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.

(a)		(b)	
	Principal office address of limited liability con (<u>Note: MUST BE STREET ADDRES</u>)	• •	Mailing address of limited liability company (<u>Note: MAY BE POST OFFICE BOX</u>)
	01/12/10		000004695
	01/13/10 Date of filing/registration in Florid		Document number
		a 4 .	isteament namoer
(a)	WYROUGH, WILLIAM EJR		and Chan a
	Registered Agent and Registered Office shown on the		of State:
	10859 EMERALD COAST PKV	NY W #204-426	
	Registered Office Address (MUST BE FLORIDA		Au
	MIRAMAR BEACH	32550	2022 TAL
(b)	MIRAMAR BEACH Northwest Registered Ag		TALL AUG
(b)		gent LLC	FILE
(b)	Northwest Registered A	gent LLC	FILED
(b)	Northwest Registered Agent and/or NEW	gent LLC	
(b)	Northwest Registered Agent and/or NEW 7901 4th St N	gent LLC	PILED

d was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(V) organ Jothe Signature of a member or authorized representative of a member

Morgan Noble

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been d in writing of this change.

Tom Glover - Assistant Secretary TLove or

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00