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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 : (855)330-1010 Fax Number

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LLC REGISTERED AGENT CHANGE EMBROITIQUE, LLC

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CEP 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.

L. Na	ame of the limited liability company: EMBROITIQUE,	LLC				
2. (a)	7901 4th ScN STE 300		7901 4th St N STE 300			
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limit (Nate: MAY BE PO.		
	St. Petersburg, FL 33702	*******	St. Petersh	ourg, FL 33702		
	04/20/2010		L10000042	865		
3.	Date of filing/registration in Florida	- 4.		Document number		
5. (a)	GRAHAM, JACLYN M					
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 901 Maybach Ct			te:		
	Registered Office Address (MUST BE FLORIDA STREET.	_				
1751	McKinney . F1					
	Northwest Registered Agent LLC	***	AND FILED 2022 SEP 12 PM 4:1 SECRETARY TO STA			
	Enter name of NEW Registered Agent and/or NEW Registered					
	7901 4th St N STE 300	_	AND ILEO			
	NEW Registered Office Address:	_	# 1: 08			
	St. Petersburg , FL	3370	2	<u>-</u>	. co	
change agent v was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	regis ability of the	stered office and company, it is limited liabilit	id the business offic is hereby confirmed ty company or as otl	te of the registered that the change(s)	
	nture of a member or authorized representative of a member	i -	Morgan Noble			
				Printed or typed name	-	
provisi the obi to mer	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address. It is din writing of this change.	ree to perfo d for hereb	act in this cap ormance of my in Chapter 60: y confirm that	acity. I further agradutes, and I am Jan 5, F.S. Or, if this do the limited liability	ee to comply with the niliar with and accept scument is being filed company has been	
Signati	ire of Registered Agent					
- 2						