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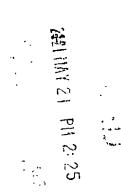
(Req	uestor's Name)	
(Addi	ress)	
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PICK-UP	☐ WAIT	MAIL
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(Doci	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fil	ling Officer:	

Office Use Only



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O SIMMONS
JUN 24 2021



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: May 19, 2021

Order#: 819975/035

Re: SH VENTURES GROUP, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX ___ File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

Na	une of the limited liability company: SH VENTUR	RES GRO	UP, LLC				
(a)	7807 Baymeadows Road East		(b)				
()	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	•••	(0)	Mailing address (Note: MAY	of limited liab	ility compa	my:
	Suite 205						
	Jacksonville, FL 32256						
	10/13/2010		L1000	00108484			
	Date of filing/registration in Florida	4.		Document nu	unber		
(a)	Feldman & Mahoney, P.A.						
()	Registered Agent and Registered Office shown on the records	of the Flo	rida Dept. o	of State:			
	2240 Belleair Road, Suite 210					6-4- 6-4-	
	Registered Office Address (MUST BE FLORIDA STREET	ET ADDRI	ESS)		- -	RELIAN 2	
	Clearwater	3376	34	 	4		. :
(b) .	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registe</u>	red Office	address:		- . .	2: 25	* ,
	Corporation Service Company						
	NEW Registered Office Address:		···.				
	1201 Hays Street						
	Tallahassee	FL 3230	1				
nge nt w s/wer artic Edv	mited liability company is not organized under the or changes are made, the Florida street address of trill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the member eles of organization or the operating agreement of the ward E. Burr	he regist liability s of the l he limite	ered offic- company, imited lia	e and the business, it is hereby confi- bility company or company. Burr	office of th rmed that th as otherwis	e register e change e provide	ed (s)
gnati	ure of a member or authorized representative of a member			Printed or typed	l name of sign	ee	
ereh visiò oblig nerei ified	y accept the appointment as registered agent and a ms of all statutes relative to the proper and comple gations of my position as registered agent as providity reflect a change in the registered office address, in writing of this change.	te perfor ded for it I hereby Corpor	mance of Chapter confirm t ation Ser	capacity. I further my duties, and I as 605, F.S. Or, if the that the limited lial vice Company , Asst. Vice Presi	m familiar v vis documen bility compo	omply with and can be in the second with and can be in the second with the sec	th the accept giled gen