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T. LEMIEUX

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MAYe 203 2023

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.

2. (a)	<u> </u>	(b)		
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)	
	10/08/2012	L1200	0128148	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	ABBOTT, MARK K			
, ,	Registered Agent and Registered Office shown on the records of		of State:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS		
	107 Avenida #23	7.11.71.71.00.7		
		32504		
(b)	Registered Agents Inc		· · · · · · · · · · · · · · · · · · ·	
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	· · · · · · · · · · · · · · · · · · ·	
	7901 4th St N		.	
	NEW Registered Office Address:		. 25	
	STE 300		Per cantain	
	St. Petersburg, FI	33702	<u>.</u>	
the cha agent v was/we the arti	imited liability company is not organized under the lainge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	f the registered ability compan of the limited li	office and the business office of the regi y, it is hereby confirmed that the change ability company or as otherwise provided	stered (s)
Rub	Componey	Robin Jone	es	
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee	
I here	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide tly reflect a change in the registered office address. I	ree to act in thi performance o	s capacity. I further agree to comply with of my duties, and I am familiar with and t	th the accept

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Signature of Registered Agent