## L12000158142

(Requestor's Name)			
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PICK-UP WAIT MAIL			
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Account#: I20000000088

Date:	02/15/2023		
	Jennifer Bialowas	_	
Reference #	1909467	_	
Entity Name	SADISCO C	F FLORIDA, LLC	
☐ Article	es of Incorporation/Authorization	to Transact Business	
	ndment		
Chan	ge of Agent		
Reins	statement		
☐ Conv	ersion		
☐ Merg	er		
☐ Dissolution/Withdrawal			
Fictitious Name			
Other			
Authorized A	Amount: 25.00		
Signature: _			

## 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. SADISCO OF FLORIDA, LLC 1. Name of the limited liability company: \_ (b) Principal office address of limited liability company: Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) (Note: MUST BE STREET ADDRESS) NO CHANGE NO CHANGE 12/18/2012 L12000158142 3. Date of filing/registration in Florida Document number 5. (a) Registered Agent and Registered Office shown on the records of the Fiorida Dept. of State: KYLE REDFEARN Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 14416 HIGH HILL POND RD **TALLAHASSEE** 32309 COGENCY GLOBAL INC. (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: 115 North Calhoun Street, Suite 4 NEW Registered Office Address: Tallahassee 32301 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) 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. Signature of a member or authorized be resentative of a member Rex W. Huggins 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 notified in writing of this change

Division of Corporations P.O. Box 6327 Tallahassee, PL 32314

Signature of Registered Agent