9/25/24, 9:58 AM

To:

Division of Corporations



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CROMULENCE LLC

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From: David Thomas

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 hability 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:	.LC					
2. (a)	705 E Strawbridge Avenue		(b)	705 E Stn	awbridge Avenue		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(• • • •	Mailing address of finited hability company: (Nate: MAY BE POST OFFICE BOX)			
	Suite 101			Suite 101			
	MELBOURNE, FL 32901			MELBOURNE, FL 32901			
	01/17/2014		I.	.14000010	027		
	Date of filing/registration in Florida				Document number		
193	CORPORATION SERVICE COMPANY						
. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat				– e		
					SE 2		
(b) ,	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1201 HAYS STREET				SILED 2024 SEP 25 PH 4: 14 BECHETARY OF STATE TO LAHASSEE, FL		
	TALLAHASSEE FL 32301-2525				25 ARY		
	C. F. Corporation System			PH 4: 14 OF STATE SSEE, FL			
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			EATE			
	NEW Registered Office Address:	·		.	-		
	1200 South Pine Island Road				_		
	Plantation FI.	13324			_		
he cha gent w vas/we he arri	mited liability company is not organized under the lawinge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the liability of the member of the liability of the li	he repositive the limited	giste con imit d lia	ered offic ipany, it i ed liabilit	e and the business office of the registere is hereby confirmed that the change(s) by company or as otherwise provided in upany.		
herel rovisi he obli mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided By reflect a change in the registered office address. The Unwriting of this change.	e 10 a perfor for it erchy	ict i mai i C'i coi	n this cap ace of my apter 602 aftra that	acity. I further agree to comply with the duties, and I am familiar with and accept. 5. F.S. Or, if this document is being filed the limited hability company has been		

C. C. Commercia

C T Corporation System By: SEAN L EMERICK ASSISTANT SECRETARY
Signature of Registered Agent