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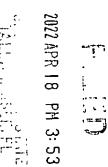
(Requestor's Name)									
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of 10/2022

COVER LETTER

TO:	Registration Section Division of Corporations									
SUBJ	CTV II. LEC	_								
Name of Limited Liability Company										
Dear S	ir or Madam:									
The er	closed Registered Agent/Registered C	Office Chan	ge and	fce(s) are submitted for filing.						
Please	return all correspondence concerning	this matter	to the	following:						
Samue	IJ. Heller, Esq.									
	Name of Person	· -								
Heller	Law, PLLC									
	Firm/Company									
111 2n	d Ave. NE. Suite 704									
	Address		-							
St. Pet	ersburg, FL 33701									
	City/State and Zip Code	?								
sheller	@heller-law.com									
F	-mail address: (to be used for future a	innual repor	rt notifi	cation)						
For fu	ther information concerning this matt	er, please c	all:							
Samue	I J. Heller	72 at (27	828-6071						
	Name of Person	*** \		Area Code & Daytime Telephone Number						
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303						
	Enclosed is a check for the following	ng amount	:							
	■ \$25 Filing Fee	55 Filing Fee & Certified Copy								

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.

I. N	ame of the limited liability company: CTV II, LLC						
2. (a)	7315 Hudson Ave., Hudson, FL 34667	(t	o)				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
3.	05/01/2014 Date of filing/registration in Florida	 - 4.	L14000070	0772 Document n	umber	···-	
	Heller Samuel I. Fra	4.		Document ii	umoci		
5. (a)	Registered Agent and Registered Office shown on the records of to 695 Central Avenue Registered Office Address (MUST BE FLORIDA STREET)	 te: 	TAL	2022 APR	·- *		
	St. Petersburg, FL	33701		_	; ·	P 22	
	Samuel J. Heller, Esq. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 111 2nd Ave. NE, Suite 704	_		PH 3: 53			
	NEW Registered Office Address: St. Petersburg, FL_	33701		_			
change agent v was/wa	imited liability company is not organized under the law c 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 o icles of organization of the operating agreement of the	registere bility cof the limited l	ed office an impany, it i iited liabilii	d the business s hereby conf ty company or npany.	s office of irmed the	of the re at the c	egistered hange(s)
Signa	ture of a member of a member		Printed or typed name of signee				
provisi the obl to merc	hy accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided etc reflect a change in the registered office address, I h I in writing of this change.	ee to act performa I for in C vereby ca	in this cap ance of my Chapter 60: onfirm that	acity. I furthe duties, and I c 5, F.S. Or, if t the limited lia	er agree i am famili this docu- ability con	to com iar with ment is mpany	ply with the h and accept s being filed has been
Signatu	re of Registered Agent						