## L14 000 189 529

<del></del>	(Requestor's Name)	
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PICK-UP	WAIT	MAJL
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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 124395 / 8423450

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: November 9, 2023

ORDER TIME : 9:29 AM

ORDER NO. : 124395-130

CUSTOMER NO: 8423450

## CHANGE OF AGENT

NAME: SOUTHERN LITHO V LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

## 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.

1. Na	ame of the limited liability company:	.ITHO V L	.LC			
2. (a)		(	b)			
. (.,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		-	
	9010 STRADA STELL CT STE 103		901	10 STRADA STELL CT STE	≣ 103	
	NAPLES, FL 34109		NA	PLES, FL 34109		
	12/11/2014		L14(	000189529		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)						
J. (u)	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept.	, of State:		
	Northern Litho, LLC				- •	
	Registered Office Address [MUST BE FLORIDA STREET	T ADDRES.	<u></u>		2023	
	9010 STRADA STELL CT., STE. 103				31:0	•
	NAPLES . F	34109			20231107 13	
	· · · · · · · · · · · · · · · · · · ·				<u> </u>	
(b)	Enter name of NEW Registered Agent and/or NEW Registered					
	Enter name of NEW Registered Agent and/or NEW Registered	ed Office ac	<u>ldress</u> :	-	կ։ 54	
	Corporation Service Company				<b>~</b>	
	NEW Registered Office Address:					
	1201 Hays Street	<u>.</u>				
	Tallahassee . F	L 32301				
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e register liability co of the lin	ed offi ompan nited li	ice and the business office only, it is hereby confirmed the iability company or as othe	of the registere nat the change(	ed s)
	/s/ Daniel Conley	Dar	niel Co	onley, Authorized Person		
Signa	ture of a member or authorized representative of a member			Printed or typed name of	f signee	
provisi the obl to mere	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. It is writing of this change.	e perform ed for in ( hereby co	ance o Chapte onfirm	is capacity. I further agree of my duties, and I am famil er 605, F.S. Or, if this doct a that the limited liability co EKIRBY, ASST. VICE PRI	liar with and a ument is being ompany has be	h the ccept filed en
Signatur	Drace Z-Kubly			- ; · · = #· · · · · · · · · · · · · · · ·		
orgnann	re of Registered Agent					