## L1500009566a

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
RA Charye					
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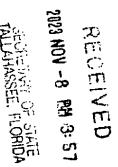
Office Use Only



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S. CHATHAM NOV - 9 2023





CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

REFERENCE: 070512 8430149

AUTHORIZATION: June Bleman

COST LIMIT : \$ 25.00

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ORDER DATE : October 17, 2023

ORDER TIME : 12:48 PM

ORDER NO. : 070512-010

CUSTOMER NO: 8430149

## CHANGE OF AGENT

NAME: CLARK SOLUTIONS 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	nme of the limited liability company: CLARK SOLUT	TIONS LL	С		
			)		
-: (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	411 SE MIZNER BLVD., STE. 72, PMB 1122		411 SE MIZNER BLVD., STE. 72, PMB 112		
	BOCA RATON, FL 33432		BOCA RATON, FL 33432		
	06/02/2015		L1500009	5662	
3.	Date of filing/registration in Florida	— <sub>4.</sub>		Document number	
5. (a)					
J. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: GENESIS TAX HOUSE OF FLORIDA, LLC				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			20 SE i	
	411 SE MIZNER BLVD., STE. 72			23 N CRE ALL	
	BOCA RATON , FI	33432		ZOZ3 NOV -8 SECRETARY TALLAHAS	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company			MH ID: 10  OF STATE SEE. FL	
	NEW Registered Office Address:			-	
	1201 Hays Street				
	Tallahassee, FL	32301		_	
change agent w was/we the arti	imited liability company is not organized under the later or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liter authorized by an affirmative vote of the members of cles of organization or the operating agreement of the celson Perella Clark	registere ability cor of the limi limited li	d office ar mpany, it i ited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in npany.	
	ture of a member or authorized representative of a member		on revenue	Printed or typed name of signee	
I herel provisi the obli to mere notified	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address. It in writing of his change.	ree to act performa d for in C hereby co	in this cap ince of my hapter 60: nfirm that	acity. I further agree to comply with the	
Signatur	re of Registered Agent				