## L15000121708

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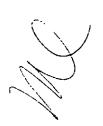
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2024 NOV -8 PH 3: 58
SECRETARY OF STATE
TALLAHASSEE, FL



## COVER LETTER

TO:	Registration Section Division of Corporations					
	SYOTOS LLC					
SUBJI	ECT:	Name of Limited L	Liability Company			
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered (	Office Change and	I fee(s) are submitted for filing.			
Please	return all correspondence concerning	this matter to the	following:			
Stephe	n D. Wilson, Esq.					
	Name of Person					
Beggs	& Lane RLLP					
	Firm/Company					
501 Co	mmendencia Street					
	Address					
Pensac	ola, FL 32502			SECR TAI	2024 NOV	
	City/State and Zip Cod	e	<del></del>	ET/	۷0	1
SDW@	)BeggsLane.com			CRETARY OF ST	æ	
E	-mail address: (to be used for future a	annual report notif	ication)	当	7P 3K	
For fur	ther information concerning this mat	ter, please call:		STATE , FL	3: 58	N <sub>e</sub> m
Stepher	n D. Wilson	850 at (	202-3342	,		
	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	ing amount:				
	■ \$25 Filing Fee	55 Filing Fee & Certified Copy				

INHS18 (2/14)

## 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.

	me of the limited liability company:  6066 Walk Along Way	(L)	PO BOX 25	531		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(D)	(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	Crestview, FL 32536		Crestview, F	FL 32536		
	July 15, 2015		L150001217	08	_	
	Date of filing/registration in Florida	<sub>4.</sub> _	Ľ	Document number	_	
. (a)	INCORP SERVICES, INC.					
. (a)	Registered Agent and Registered Office shown on the records of	f the Florida I	Dept. of State:			
	3458 LAKESHORE DRIVE					
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)				
	TALLAHASSEE	L_32312				
	, F.	L				
(b)	Stephen D. Wilson, Esq.			S E	<b>;</b>	
( )	Enter name of NEW Registered Agent and/or NEW Registered Office address:			SECRETALLA	•	
	Beggs & Lane RLLP			CARON -8 PM 3 ECRETARY OF S TALLAHASSEE,	<u>:</u>	
	NEW Registered Office Address:			ASSA ASSA		
	501 Commendencia Street					
	Pensacola , F	r 32502		3: 58 STATE E, FL		
				***		
hange gent v vas/we	mited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li- are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registered iability con of the limit limited lia	l office and npany, it is l ed liability bility comp	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.		
	The Malle- tre of a member or authorized representative of a member	Tra	i Mch	VIIIC Printed or typed name of signee		
Lharal	We of a member or authorized representative of a member by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete ignitions of my position as registered agent as provide by reflect a change in the registered office address, I	ree to act i	n this canae	rity. I further garee to comply with the	e pt	