Fax: 8134365206 To: 18506176383 Page, 1/2 12/30/2024 12,28,08 PST

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE TDH WINGS, LLC

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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. No	ame of the limited liability company: <u>TDH Wings, LLC</u>				
2. (a)	7901 4th St N STE 300	(b) ⁷⁹	(b) 7901 4th St N STE 300		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		=	of limited liability company: BE POST OFFICE BOX	
	St. Petersburg FL 33702 US	St.	St. Petersburg FL 33702 US		
					
	09/10/2015	<u>L15</u>	000154927		
3.	Date of filing/registration in Florida	4.	Document nu	ımber	
5. (a)	HOWELL, TINA D				
	Registered Agent and Registered Orfice shown on the records of the	he Florida Dep	t, of State		
	6815 Biscayne Blvd	inanies.			
	Registered Office Address	DDKE.SS)			
	Suite 103 PMB 214				
	Miamı , FL_	33138			
				22	
-	Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address:		<u> </u>		
	and manic of Man Registered Agent and on Man Registered	Office address		(i) 11 (i) 11	
	7901 4th St N				
	NEW Registered Office Address			: O	
	STE 300				
				F	
	St. Peterspurg . FL.	33702			
the cha agent v was/wa	imited liability company is not organized under the law inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the registere bility compa f the limited	d office and the busin my, it is hereby confi Tiability company or	ness office of the registered rmed that the change(s)	
	tore of a member or authorized representative of a member	<u>Robin Jo</u>	nes Printed or types		
provisi the obl to mere	by accept the appointment as registered agent and agre fons of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change.	ic to act in to performance! I for in Chap erchy confir	his capacity. I furthe of my duties, and La sicr 605, F.S. Or, if the m that the limited lia	r agree to comply with the m familiar with and accept his document is being filed bility company has been	
David'	David Roberts - Assistant Se iz of Registered Agent	cretary			
ិសម្ភាគមេ	m or registeren Mean				