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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

\*Entos the email address for this business entity to be used for future to be used for f

## LLC REGISTERED AGENT CHANGE MARIA SANTORO VP, LLC

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M. SOLOMON FEB 2 2 2024

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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 695.0116, Florida Statutes, the undersigned limited hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. No	une of the limited liability company	MARIA SANTORO	) VP. LLC		
2. (a)			(b)		
	Principal office address of limited (Note: MUST BE STREET	hability company:	-	Mailing address of limite (Note: MAY BE POS	ed liability company:
	12/31/15		· . —	00001073	
3.	Date of filing/registration	in Florida	4.	Document number	
5. (a)	***************************************				
	Registered Agent and Registered Othice sh	town on the records of t	he Florida Dept.	of State.	
	1170 LAGUNA				202
	Registered Office Address (MUST BE	<u>FLORIDA STREET A</u>	(DDRESS)		* ] 2024 FEB
					B
	WESTON	FL	33326	_ <del></del>	22
(b)	Registered Agents Inc				PH 12: 16
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	Taker hame or the researched Agency	MOS ATTA REGISTERE	Onice address.		16
	7901 4th St N				
	NEW Registered Office Address:				
	STE 300				
	St. Petersburg	, FI.	33702		
the cha agent v was/wa the agti	imited liability company is not orgainge or changes are made, the Florid will be identical. Or, in the case of a cere authorized by an affirmative voticles of organization or the operating	nized under the law la street address of a Florida limited lia e of the members o g agreement of the	the registered bility compar f the limited l	office and the business only, it is hereby confirmed iability company or as other ty company.	ffice of the registered that the change(s)
Signa	when the factorial ture of a member of anotherized representation	ve of a member		Printed or typed name	of signee
There provisi the obi to mer	lm accent du annointment as regist	ered agent and agr	ce to act in the performance of	is capacity. I further agre	ce to comply with the
	ions of all statutes relative to the pr ligations of my position as registere ely reflect a change in the registere d in writing of this change.  David Rober			a that the limited liability	company has been