

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000073175 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803

Fax Number

: (813)436-5206

the email address for this business entity to be used for future Samual report mailings. Enter only one email address please.\*\*

இது வாய்சு report mailings. Enter o

## LLC REGISTERED AGENT CHANGE SGL-INVEST LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

FEB 2 6 2024

Electronic Filing Menu — Corporate Filing Menu

Help

2/23/2024 08:48:35 PS# > . . . To 18506176383 Page: 2/2 From Registered Agents Inc. Fax: 8134365206

## 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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Elimitation

2. (a) j	(b)					
	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	7901 4th St N STE 300	7	7901 4th St N STE 300			
	St. Petersburg, FL 33702		St. Petersburg, FL 33702			
	01/27/16	LI	6000019172			
3.	Date of filing/registration in Florida	4.	Document	t number		
5. (a)	INCORP SERVICES, INC.					
	Registered Agent and Registered Office shown on the records of	the Florida D	ept. of State.			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2024 TAL		
	3458 LAKESHORE DRIVE			A FEB	<b></b> D	
(h)	TALLAHASSEE	32312	<del></del>	LAHASS		
	Registered Agents Inc			3 PK 3: 07		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		<u>155</u> 1	3: 07		
	7901 4th St N			07 302		
	NEW Registered Office Address:					
	STE 300					
	St. Petersburg FI	33702				

-----Printed or typed name of signer Signature of a member or authorized representative of a member

Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered affice address, I hereby confirm that the limited liability company has been notified in writing of this change.

David Roberts - Assistant Secretary

Signature of Registered Agent