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To:

Division of Corporations

To: 18506176383

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

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

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

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LLC REGISTERED AGENT CHANGE **CLEJ ASSET MANAGEMENT LLC**

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1/16/2025 12:05:26-PST To: 18506176383 Page: 4/4 From: Northwest Registered Agent Fax: 2083295246

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	ame of the limited liability company: CLEJ Asset Mana	gement LLC	
2. (a)		(b)	
(-,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	7901 4th St N STE 300	7901 4th	SUN STE 300
	St. Petersburg FL 33702	St. Peters	sburg FL 33702
	06/20/16	L16000121	1782
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	WILLIAMS, LAURA, MRS		
ν. (ιι)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of St	ate
	1960 W Pebble Path		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	_
	Vero Beach	32963	_
	FL.		- · · · 2025
(b)	Northwest Registered Agent LLC		- C.
(6)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		F1. 2025 JAN 16
	7901 4th St N		
	NEW Registered Office Address:		င့်ာ
	STE 300		_ 20
	St. Petersburg	33702	
the cha agent v was/we the arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	vs of the State of F the registered officability company, it of the limited liabilitimited liabilitimited liability co	ee and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
Siana	ture of a member or authorized representative of a member	Nat Smith	Printed or typed name of signee
I herei provisi the obl to mere	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address. If d in writing of this change. Taylor Newman - Assistant Se	performance of my d for in Chapter 60 herchy confirm tha	nacity. I further agree to comply with the