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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

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

漢màil Address:_____

LLC REGISTERED AGENT CHANGE STEWART GOLF, LLC

| Certificate of Status | 0 |
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T. LEMIEUX

JUN 2 3 2023

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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. 1 | Nai | me of the limited liability company: | art Golf, LLC | | | | | | |
|-------------------------|--------------------|--|---|---|--|---|---|---|--|
| 2. (a | ı) _ | Principal office address of limited liability of | company: | (b) | | Mailing address of limited liability company; | | | |
| | | (Note: MUST BE STREET ADDRE | <u>'S.S</u>) | | (<u>Note: MAY i</u> | <u>BE POST</u> | <u> OFFICI</u> | E BOX) | |
| | | | | | | | | | |
| 3. | | Date of filing/registration in Flori | da | 4. | Document no | ımber | ······································ | | |
| 5. (a) | a) | EXPORTACTION, LLC | | | | | | | |
| ` | | Registered Agent and Registered Office shown on the records of the Florida Dept. of State | | | | | | | |
| | | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | | | | | |
| | | 4600 140TH AVENUE N SUITE 180 | | | | | | | |
| | | CLEARWATER | , FL_ ^{3:} | 3762 | | | | | |
| (h | | Northwest Registered Agent LLC | | | | | | | |
| (b) | | Enter name of NEW Registered Agent and/or NEW Registered Office address: | | | | | | | |
| | | | | | , | - | 20 | | |
| | | 7901 4th St N | | | _ | | 23 | | |
| | | NEW Registered Office Address: | | | | | `.== .: | ~ | |
| | | STE 300 | | | | | 22 | F | |
| | | | | | | | PH | r~ C | |
| | | St. Petersburg | , FL | 3702 | | - | :2 | | |
| | | | | A - 4 | | - ` | C J1 | | |
| If the | : lit bar | mited liability company is not organized u age or changes are made, the Florida stree | nder the laws Laddress of th | s of the State of he registered of | Florida, it is her fice and the busi | reby cor mess of | itirmed fice of t | that after he registered | |
| ageni | t w | ill be identical. Or, in the case of a Florid | la limited liab | ility company, | it is hereby conf | irmed tl | hat the c | :hange(s) | |
| was/ | we rtic | re authorized by an affirmative vote of the cles of organization or the operating agree | members of ment of the li | the limited liab mited liability | olity company of company. | as othe | erwise p | rovided in | |
| | | rr-smith | | Nat Smith | • • | | | | |
| , | | ure of a member or authorized representative of a m | | Printed or typed name of signee | | | | | |
| provi the o to me | isio bli ere | y accept the appointment as registered ag ons of all statutes relative to the proper an gations of my position as registered agent ly reflect a change in the registered office I in writing of this change. | ent and agree d complete p as provided j address, I he | e to act in this of erformance of for in Chapter ereby confirm to | capacity. I furth ny duties, and I 605, F.S. Or, if hat the limited lid | er agree am fam this doc ability c | e to com iliar wit cument i, company | ply with the h and accept s being filed has been | |
| <u>~</u> /\ | / | Taylor Newman | Assistant Sec | retary | | | | | |
| Signa | atur | e of Registered Agent | | | | | | | |