(Requestor's Name)				
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

	ACCOUNT NO.	:	120000001	95
	REFERENCE	:	866024	8415576
	AUTHORIZATION	:	1000	
	COST LIMIT	:	C\$725 100 BCL	nan
	<b>.</b> - <b>.</b>		(/-'<>	
ORDER DATE :	July 12, 2023			
ORDER TIME :	9:28 AM			
ORDER NO. :	866024-076			
CUSTOMER NO:	8415576			
·				
	CHANGE OF A	<u>GEN</u>	<u>T</u>	
NAME.	UB FUNDING, L	T C		
MANE.	OB FONDING, L	т¢		
PLEASE RETURN	THE FOLLOWING AS	PR	OOF OF FILI	NG:
CERTI	FIED COPY			
	STAMPED COPY			

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

## 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. N	ame of the limited liability company:	, LLC	
2. (a)			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2151 Central Avenue	2151 Ce	entral Avenue
	St. Petersburg, FL 33713	St. Pete	ersburg, FL 33713
	04/05/2017	L170000	75077
3.	Date of filing/registration in Florida	4.	Document number
÷ (a)			
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florida Dept. of St	ate:
	C T CORPORATE SYSTEM		
	Registered Office Address (MUST BE FLORIDA STREET  1200 S PINE ISLAND RD	TADDRESS)	2023 JUL Shah
	PLANTATION , F	33324	- JUL 13
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	ed Office address:	Pil 5: 39
	NEW Registered Office Address:		_
	1201 Hays Street		
	Tallahassee F	L_32301	
change agent v was/w	limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members if the of organization or the operating agreement of the control of	e registered office a iability company, it of the limited liabil e limited liability co	and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in ompany.
	Ju E. agni	Jill Cilmi, Authorized Person	
I here provisi the obi to mer notifie	wire of a member or authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of this change.	gree to act in this ca e performance of my ed for in Chapter 60 hereby confirm tha	Printed or typed name of signee pacity. I further agree to comply with the pacity, and I am familiar with and accept of J.F.S. Or, if this document is being filed t the limited liability company has been
Signatu	ire of Registered Agent E. Kirby, Asst. Vice President		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00