Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

From:

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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 annual report mailings. Enter only one email address please. **

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LLC REGISTERED AGENT CHANGE DWARA, LLC

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Page Count	02
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JAN 03 2023

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

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-	MORAN BLVD						
Registered Office A	Address (MUST BE FLC	ORIDA STREET ADDR	ESS)				
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ORLANDO		_{. FL} 328	22		날	2022 [
	st Registered	Agent LLC	,		19.00 19.00 19.00 19.00 19.00	DEC 29	
Enter name of <u>NEV</u>	V Registered Agent and/or	NEW Registered Office	address:			P	Ċ
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NEW Registered C	tfice Address:			· · · · · · · · · · · · · · · · · · ·	· -:	9	
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was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company

Morgan Poble	Morgan Noble				
Signature of a member or authorized representative of a member	Printed or typed name of signee				

I hereby 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 office address. I hereby confirm that the limited liability company has been merified in writing of this change.

Tom Glover - Assistant Secretary

Signature of Registered Agent