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LLC REGISTERED AGENT CHANGE CLT INDUSTRIAL FLORIDA, LLC

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MAR 0 5 2024 K. Brumbley

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: CLT Industrial F	Florida, Ll	.C		
2. (a)	189 S Orange Avenue	(b) 189	S Orange Avenue	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	r:
	1170		1174	0	
	ORLANDO, FL 32801		ORI	LANDO, FL 32801	
	12/06/2017		L1700	(M)250218	
3. 5. (a)	Date of filing/registration in Florida STEVEN MCCRANEY	4.		Document number	
ζ,	Registered Agent and Registered Office shown on the records of 189 S Orange Avenue	f the Florid	a Dept.	of State:	
(a)	Registered Office Address (MUST BE FLORIDA STREET) 1170	ADDRES.	<u>21</u>		
	ORLANDO	32801			
	Corporate Creations Network Inc.	2024 HAR - 1	÷		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				- - <u>- 간</u> :
	801 US Highway I				
	NEW Registered Office Address:			:	•
	North Palm Beach	L_33408			
change agent v was/we	imited 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 light authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registere ability ec of the lin	ed offic impany sited lia	ice and the business office of the registere y, it is hereby confirmed that the changets jability company or as otherwise provided	d ()
	Wat	Kev	in Dute	eau, Attorney-in-Fact	
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and agi ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I is I'm writing of this change	ree to act performed for in C hereby co	in this ance of hapter infirm	s capacity. I further agree to comply with of my duties, and I am Jamiliar with and ac er 605, F.S. Or, if this document is being j that the limited liability company has bee	the cept iled n

Kevin Duteau, Special Secretary