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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I2009000081 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 REASONABLE DOUBT LLC

Certificate of Status	0
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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

(a)	(b)								
	Principal office address of limited liability con (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compa (Note: MAY BE POST OFFICE BOX				mpany		
	7901 4th St N STE 300	_	7901 4th St N STE 300						
	St. Petersburg FL 33702		St. Petersburg FL 33702						
	03/25/18		l	L1800	015632	26			
	Date of filing/registration in Florida	1 4.			Document n	umbei	r		
				•					
	Revistered Office Address (AIUST RF FLORIDA	STREET ADDR	(223)						
	Registered Office Address (MUST BE FLORIDA 845 John Cressler Dr	STREET ADDR	ESS)			143		۲۶	
						Ng T		2023 H	
(b)	845 John Cressler Dr					No.		11 21 H 8303	ŗ.
(b)	845 John Cressler Dr Seffner	FL_ 33	584			No.		<u>t-</u>	<u></u>
(b)	845 John Cressler Dr Seffner Registered Agents Inc	FL_ 33	584			No.			· -
(h)	845 John Cressler Dr Seffner Registered Agents Inc Enter name of NEW Registered Agent and/or NEW	FL_ 33	584			No.			· -

the articles of organization or the operating agreement of the limited liability company.

Color and wanter	ROBIN JONES
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 notified in writing of this change. Dulla Nepsells

David Roberts - Assistant Secretary

Signature of Registered Agent