Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230000988143)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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 a	address	for	this	busin	ess	entity	to	be u	ised	for	future
in an	nual	report	mailin	as.	Enter	only	one	email	add	ress	ple	ase.	* *

LLC REGISTERED AGENT CHANGE **OHBTW LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

MAR'1"6" 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

(a)		(b	o)		
	Principal office address of limited liability company (Nate: MUST BE STREET ADDRESS)	:	Mailir	ng address of lunite ote: MAYBE POS	d liability compa
	9900 W SAMPLE RD STE 300		9900 W SA	MPLE RD ST	E 300
	CORAL SPRINGS, FL 33065		CORAL SP	RINGS, FL 3	3065
	08/15/18		L180001	95372	
	Date of filing/registration in Florida	4.	Doc	cument number	
(a)	LEGALINC CORPORATE SERVICES II	VC.			
(**)	Registered Agent and Registered Office shown on the recor		i Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STR	EET ADDRESS	<u></u>		
	Registered Office Address (MUST BE FLORIDA STR. 476 RIVERSIDE AVE.	EET ADDRESS	<u></u>		
(b)	476 RIVERSIDE AVE.			 ~	~>
(b)	476 RIVERSIDE AVE. JACKSONVILLE	. ғ <u>г. 32202</u>	2	- E	2023
(b)	476 RIVERSIDE AVE. JACKSONVILLE Registered Agents Inc	. ғ <u>г. 32202</u>	2	 E	2023 H+7
(b)	476 RIVERSIDE AVE. JACKSONVILLE Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Agent.	. ғ <u>г. 32202</u>	2	- e	15
(b)	476 RIVERSIDE AVE. JACKSONVILLE Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Agent	. ғ <u>г. 32202</u>	2	E	2023 H 17: 15 AM 11:

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.

Rolling Jones	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 natified in writing of this change.

David Roberts - Assistant Secretary

Signature of Registered Agent