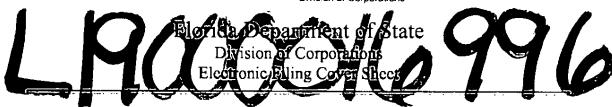
Division of Corporations



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(((H23000208490 3)))



H230002084903ABC

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tgood@trenam.com

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T. Helpieux

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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 Florida.

1. N	lame of the limited liability company: FF Vupulse Fun	id LLC			
2. (a)	·		(b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		;	Mailing address of limited lia (Note: MAY BE POST O	
	1311 N. Westshore Boulevard, Suite 101		1311 N. W	estshore Boulevard, Suite	101
	Tampa, FL 33607		Tampa, FI	. 33607	
	01/15/2019		L190000169	996	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	Trenam Law				
(Registered Agent and Registered Office shown on the records of 101 E. Kennedy Boulevard	f the Flor	ida Dept. of State	- 5:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Suite #2700			•	
	Tampa , F	L_33602		-	
(b)	TK Registered Agent, Inc.			<u>.</u> .	\a 60 70 41
, .	Enter name of NEW Registered Agent and/or NEW Registers	d Office	address:	-	<u>د .</u> د .
	101 E. Kennedy Boulevard				
	NEW Registered Office Address:			•	رب س ر
	Suite 2700			•	.2H13:
				•	5: 5:
	Tampa , F	L_33602		_	
chang agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited latere authorized by an affirmative vote of the members cicles of organization or the operating agreement of the	e registe iability of the l	ered office and company, it is imited liability	if the business office of the hereby confirmed that the company or as otherwise.	the registered the change(s)
	Thomas Pullace	T	homas Wallace		
Sign	ature of a member or authorized representative of a member			Printed or typed name of sig	mee
provis the ob to mer	eby accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, l ed in writing of this change.	e pertor.	mance of my a	luties, and I am familiar	with and accept
	Mr.				
Signat	ure of Registered Agent				