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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Email Address:___

Phone : (307)200-2803 Fax Number : (855)330-1010

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LLC REGISTERED AGENT CHANGE **KOSTRADA LLC**

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T. LEMIEUX MAY - 3 2022

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.

lorida				t)	
. Nai	ne of the limited liability company: \underline{K}	ostrada LLC			
(a)	7901 4th St N	((b) 7901 4th St N		
, (**/ <u>-</u>	Principal office address of limited liabili (Note: MUST BE STREET ADD			ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	STE 300		STE 300	ourg FL 33702	
	St. Petersburg FL 33702		St. Peters		
	02/25/19		L19000	0054963	
	Date of filing/registration in Fl	orida 4.]	Document number	
. (a)	NATALIE BEADLE				
, (a)	Registered Agent and Registered Office shown of	on the records of the Florid	la Dept. of State:		
	17103 64TH PLACE N.			203	
	Registered Office Address (MUST BE FLO	RIDA STREET ADDRES	<u>(S)</u>	10 P	
	LOXAHATCHEE33470		2022 APR 29 PM 1: 46 2022 APR 29 PM 1: 46 FALLY MASSEE TORIDS		
(b)	Northwest Registered	Agent LLC		125	
(0)	Enter name of NEW Registered Agent and/or		ddress:	DRIE 6	
	7901 4th St N			T-	
	NEW Registered Office Address:				
	STE 300				
	St. Petersburg	, FL3370	2		
he cha igent v	imited liability company is not organize ange or changes are made, the Florida st will be identical. Or, in the case of a Flore authorized by an affirmative vote of the of organization or the operating ag	reet address of the reported limited liability the members of the li	gistered office company, it is mited liability	hereby confirmed that the change(s) company or as otherwise provided in	
(")	Jorgan Jothe		organ Nol	ole	
Signa	ture of a memb. 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 agrifted in writing of this change.

on Tom Glover - Assistant Secretary

Signature of Registered Agent