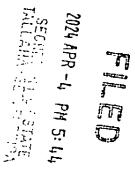


(Requestor's Name)					
(Address)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
المصاد					
Limils					





04/04/24--01026--002 **1575.00



COVER LETTER ...

TO: Registration Section Division of Corporations	
EEE Investments, LLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Kylie Conrad & Kayla King	
Name of Person	
Corp1, Inc.	
Firm/Company	
7700 E Arapahoe Rd Ste 220	
Address	
Centennial, CO 80112	
City/State and Zip Code	
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, please	e call:
Kylie Conrad	720 823-9273
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amou	int:
■ \$25 Filing Fee	S55 Filing Fee & Certified Copy
INHS18 (2/14)	

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.

l. Ni	ume of the limited liability company:EEE Investments,	LLC				
2. (a)	Forest 2 SE of 8th	(b)	Forest 2 S	E of 8th		
-, (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(, ,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Carmel, CA 93923	<u> </u>	Carmel, CA 93923 L19000099857			
	04/10/2019	I				
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	CSC					
J. (u)	Registered Agent and Registered Office shown on the records of t 1201 HAYS STREET	the Florida	Dept. of State	- ::		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2024 Ser Tall		
(b)	TALLAHASSEE, FL	32301-25	25	FILARAS		
	Registered Agents Inc			R M		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :					
	7901 4th St N			5: 44		
	NEW Registered Office Address:					
	Ste 3(t)			_		
	St. Petersburg, FL	33702		_		
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o celes of organization or the operating agreement of the	vs of the S registered bility cor f the limi	l office and npany, it is ted liability	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in		
	DIA MERE	LYD	IA MERL			
	ture of a member or authorized representative of a member			Printed or typed name of signee		
provisi the obl to merc	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I h I in writing of this change.	ee to act i performa I for in Ci iereby coi	n this capa nce of my a hapter 605 ifirm that i	icity. I further agree to comply with the luties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been		
-	VID ROBERTS					
Signatu	re of Registered Agent					