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To:

**Division of Corporations** 

Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

Account Number: 120090000081 Phone: (307)200-2803 Fax Number: (855)330-1010

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## LLC REGISTERED AGENT CHANGE 4240 S. SEMORAN BOULEVARD, LLC

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability cosubmits the following statement in order to change its registered office or registered agent, or both, in the Florida.

1. Name of the limited liability comp	<sub>pany:</sub> 4240 S	Semora	an Blvo	d, LLC	
<sub>2. (a)</sub> 7901 4th St N		(b) _	7901 4th		
Principal office address of lin ( <u>Note: MUST BF, STR</u>				-	limited liability com POST OFFICE BO
STE 300			STE 300		
St. Petersburg FL 33	702		St. Peters	sburg FL 33	702
05/23/19		L	1900014	41714	
3. Date of filing/registra	tion in Florida	<u></u> 4.		Document nur	nber
5. (a) C T CORPORATION SY	STEM				
J. (a)	ice shown on the records	of the Florida D	ept, of State:		
Registered Agent and Registered Off					
Registered Agent and Registered Offi 1200 SOUTH PINE IS					
1200 SOUTH PINE IS		T ADDRESS)			
1200 SOUTH PINE IS	SLAND ROAD	T ADDRESS)			;
1200 SOUTH PINE IS	SLAND ROAD T BE FLORIDA STREE	TADDRESSI FL 33324			;
PLANTATION  Northwest Registered South PINE IS  PLANTATION	SLAND ROAD T BE FLORIDA STREE	<sub>FL</sub> 33324			,
1200 SOUTH PINE IS Registered Office Address (MUS) PLANTATION	SLAND ROAD  T BE FLORIDA STREE  tered Agent	<sub>FL</sub> 33324	ess:		,
1200 SOUTH PINE IS  Registered Office Address (MUS)  PLANTATION  (b) Northwest Registered South Pine IS  (b) Northwest Registered Office Address (MUS)	SLAND ROAD  T BE FLORIDA STREE  tered Agent	<sub>FL</sub> 33324	ęss:		•
PLANTATION  (b) Northwest Registered Age	SLAND ROAD  T BE FLORIDA STREE  tered Agent	<sub>FL</sub> 33324	<u>ess</u> :		•
PLANTATION  (b) Northwest Registered Age  The rame of NEW Registered Age  7901 4th St N	SLAND ROAD  T BE FLORIDA STREE  tered Agent	<sub>FL</sub> 33324	ęss:		•

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of the reagent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the chan was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provi the articles of organization or the operating agreement of the limited liability company.

the arricles of organization of the operating agreement of the	• • • • • • • • • • • • • • • • • • • •
Morgan Oothe	Morgan Noble
Signature of 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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with at the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is be to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has notified in writing of this change.

Assistant Secretary

Glover - Assistant Secretary

Signature of Registered Agent