Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

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JUN - 7 2022

K. Brumbley

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

(a)		(b)				
` ,	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	09/01/2019	 Lí	 L90002228	330		
	Date of filing/registration in Florida	4.	Documen	nt number		
(a)	GOMEZ PAZ, EDGARDO A					
(11)	Registered Agent and Registered Office shown on the records of	ot, of State:				
	10826 PEPPERSONG DR					
	Registered Office Address (MUST BE FLORIDA STREET					
	RIVERVIEW , F	_{1.} 33578		2022 JUN		
(b)	Registered Agents Inc.					
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office addres	<u></u>	7 EA		
	7901 4th St N					
	NEW Registered Office Address:					
	STE 300					
	St. Petersburg , F	_L 33702				
ie chi gent v ras/we	imited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the register liability comp of the limited	ed office and the b pany, it is hereby c d liability compan	business office of the registered confirmed that the change(s)		
	Ribuy Tark	Riley	Park			
Siona	ture 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 notified in writing of this change.

Bill Havre - Assistant Secretary

Signature of Registered Agent