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RARCIOS

APR 0 6 2022 I ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 584209 8276536

AUTHORIZATION :

COSI DIMII . \$ 25...00

ORDER DATE: March 31, 2022

ORDER TIME : 3:04 PM

ORDER NO. : 584209-020

CUSTOMER NO: 8276536

CHANGE OF AGENT

NAME: DEDICATED MISSOURI HOLDING,

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

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)	1395 NW 167TH STREET		(b) 1395 NV	W 167TH STREET
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		· · ·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33169		MIAMI, F	FL 33169
	10/15/2019		L1900025	58934
(a)	Date of filing/registration in Florida CHANDLER, KATHRYN	4.		Document number
(/	Registered Agent and Registered Office shown on the records 1405 NW 167TH STREET	of the Flori	da Dept. of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRE	SS)	2022 APR
	MIAMI	33169 FL)	APR -5 AM
(b)				A A A A A A A A A A A A A A A A A A A
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office :	<u>address</u> :	8:27 STATE E.FL
	Corporation Service Company			27 1-
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee, I	FL_32301		_
ange ent w is/we arti	imited liability company is not organized under the lor changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ne registe liability of s of the li	red office ar company, it i mited liabili	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
	ure of a niember or authorized representative of a member	Jil	l Cilmi, Auth	norized Person
				Printed or typed name of signee
	by accept the appointment as registered agent and a ons of all statutes relative to the proper and complet	gree to a le perform	ct in this cap nance of my Chapter 60	pacity. I further agree to comply with the duties, and I am familiar with and accepts. F.S. Or, if this document is being file the limited liability company has been

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