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Division of Corporations

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Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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T. LEMIEUX

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

Principal office address of limited liabil (Note: MUST BE STREET ADL	ity company:	Mailing address of limite (Note: MAY BE POS	
03/24/20		20000088480	
Date of filing/registration in F	lorida 4.	Document number	
BRADEN, LISA			
Registered Agent and Registered Office shown		pt. of State:	
4623 FOREST HILL BLVD.			
Registered Office Address (MUST BE FLO	<u> DRIDA STREET ADDKESS)</u>		
STE. 108	00.14.5		
WEST PALM BEACH	. FL 33415		
Northwest Registered	I Agent LLC	-	22
Enter name of NEW Registered Agent and/or		<u>ss</u> :	<u>′</u> ≅
7901 4th St N		,	= = = = = = = = = = = = = = = = = = =
NEW Registered Office Address:		_	<u>=</u> :-i
STE 300			74 10 78 12
St. Petersburg	, FL 33702	24	<u> </u>

J the articles of organization or the operating agreement of the limited liability company.

ne affectes of organization of the operating agreement of the	
Morgan Jothe	Morgan Noble
Signature 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 in writing of this change.

Tom Glover - Assistant Secretary

Signature of Registered Agent