(813) 436-5206



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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

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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.

1. 1	Name of the limited liability company:	ind Manag	ment LLC			
2. (a	Principal office address of limited liability company:	(b)			
	(Note: MUST BE STREET ADDRESS)	_		dailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	6/25/2020		L200001773	99		
3.	Date of filing/registration in Florida	4.		Document number		
5. (ε) LOGAN, NYESHA E					
	Registered Agent and Registered Office shown on the records of a 10 MOSELEY AVE	:: 				
	Registered Office Address (MUST BE FLORIDA STREET)	<u> 4DDRESS)</u> 	<u>!</u> 	SECRETA		
	EATONVILLE FI	32751		ASSE ASSE ASSE ASSE ASSE ASSE ASSE ASSE		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 7901 4th St N	Iress:	AM 9: 33			
	NEW Registered Office Address:	NEW Registered Office Address:				
	STE 300					
	St. Petersburg FL.	33702				
the chagent was/v	limited liability company is not organized under the law hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the regis ability co of the limi	tered office mpany, it is ited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
	ature of a member of authorized representative of a member	Nat S	imith			
			. ,.	Printed or typed name of signee		
provi. the ol to me	eby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete oligations of my position as registered agent as provided rely reflect a change in the registered office address, I h	ee to act performa d for in C hereby co	in this capo ince of my o hapter 605, infirm that t	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		
поир	cd in writing of this change. ممال مية Taylor Newman - Assistant Se					
- /	ure of Registered Agent					