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Office Use Only



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2022 FEB 28 AM II: 55
VILLAHASSEE, FLORE

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 513985 8368973

AUTHORIZATION : Spelle man

COST LIMIT : \$\frac{25}{25}.00

ORDER DATE: February 24, 2022

ORDER TIME : 8:11 AM

ORDER NO. : 513985-001

CUSTOMER NO: 8368973

CHANGE OF AGENT

NAME: 413 SOLUTIONS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- 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.

2. (a) Principal office address of limited liability company: (Note: MIST BESTREET ADDRESS) 24 CATHEDRAL PLACE SUITE 612 SAINT AUGUSTINE, FL 32084 SAINT AUGUSTINE, FL 32084 SAINT AUGUSTINE, FL 32085 7/724/2020 L20000218545 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: INCORP SERVICES, INC. Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 17888 67TH COURT NORTH LOXAHATCHEE FL 33470 Enter name of NEW Registered Office Address: 1201 Hays Street Tallahassee FL 32301 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an altimative vote of the members of the limited liability company or so otherwise provided in the articles of organization or the operating agreement of the limited liability company or so otherwise provided in the articles of organization or the operating agreement of the limited liability company. The provisions of all stantias relative to the proper and complete performance of my duties, and I am jamiliar with and accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of this y hange. Separate of a member of authorized epersonative of a member Frinted or typed name of signee Frinted or typed name	1. Na	ame of the limited liability company: 413 SOLUTION	S, LLC					
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Signature of Registered Agent	Class:	Diace Cokubly						

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

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Grace E. Kirby, Asst. Vice President