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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (813)436-5206

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Email Address:

LLC REGISTERED AGENT CHANGE 7317 RODGERS DRIVE, LLC

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K. SALY AUG 2 1 2024

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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company	mve, LLC	
2. (a)		(b)	
_ · · · · ·	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	304 CREEK BEND DRIVE	3	04 CREEK BEND DRIVE
	ALEDO, TX 76008		LEDO, TX 76008
	11/10/20	L2	0000351864
3.	Date of filing/registration in Florida	— _{4.} —	Documen: number
5. (a	SLAMAN, AMY P. ESQ.		
5. (a	Registered Agent and Registered Office shown on the records o		
	Registered Office Address (MUST BE FLORIDA STREET		1A1
	4100 Legendary Drive Suite 200		
	Destin, F	L_32541	TIPA ANG 20 NALLATIASS
. 1	Registered Agents Inc		FILED AH 4: 29 LEANING SEPTE DAND
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office addre	
	7901 4th St N		29
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg	33702	
the ch agent was/w the art	limited liability company is not organized under the la ange or changes are made, the Florida street address a will be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members ticles of organization or the operating agreement of the florida member or authorized representative of a member or authorized representative of a member.	aws of the St of the registe liability com of the limite	ate of Florida, it is hereby confirmed that after red office and the business office of the registered pany, it is hereby confirmed that the change(s) ad liability company or as otherwise provided in bility company.
Sign	attice of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to mei	by accept the appointment as registered agent and agions of all statutes relative to the proper and completed ligations of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this change.	e performan led för in Ch hereby com -	this capacity. I further agree to comply with the ee of my duties, and I am familiar with and accept upter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
Sunat	David Roberts - Assistant Starte of Registered Agent	Secretary	