Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 : (813)436-5206 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

LLC REGISTERED AGENT CHANGE CRYSTAL DENNSTEDT LLC

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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 submus the following statement in order to change us registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company: CRYSTAL DENN	ISTEDT	LLC	
2. (a)	7901 4TH ST N	(b	7901 4 []	H ST N
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	```		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	STE 300		STE 300	
	ST. PETERSBURG, FL 33702	_	ST. PETE	ERSBURG, FL 33702
	01/04/2021	I	_21000014	4039
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Zenbusiness Inc.			
	Registered Agent and Registered Office shown on the records of t 336 E. College Ave. Suite 301	he Florida	Dept of Sta	te:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_
	Registered Office Address <u>Most III, Close Page Strain, Canada and Canada and</u>			- 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	Tallahassee FL	32301		S
(b)	REGISTERED AGENTS INC			ा । जि. १७ १म
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ado	lress;	- · · · · · · · · · · · · · · · · · · ·
	7901 4TH ST N			:-
	NEW Registered Office Address.			
	STE 300			_
	ST. PETERSBURG F1.	33702		<u></u>
change agent v was/we the arti	imited liability company is not organized under the law for changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	registere bility con t the limi limited li	d office ar npany, it i ted liabilit ability cor	id the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
1	fure of a member or authorized representative of a member	HODI	n Jones 	Printed or typed name of signee
I herei provisi the obl to mere notifica	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address. In a myriting of this change. David Roberts TO PROPES David Roberts	ce to act performa I for in C ereby co	in this cap nce of my hapter 60, nfirm that	socity. I firether agree to consoly with the