Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corpora	ations	-	J Q
Fax Number : (8		(36) (40)	P ::
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Account Name : REGISTERED AGENTS INC.			CI
Account Number : I20090000081			477
Phone : (307)	200-2803		
Fax Number : (8	55)330-1010		
-	*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **		

LLC REGISTERED AGENT CHANGE ZLIMBO PRODUCTIONS, LLC

Certificate of Status	0
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Help

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

i)	me of the limited liability company: ZLI 7410 5TH AVE N	_{o)} 7410 5TH AVE N	
-/ .	Principal office address of limited liability c (Note: MUST BE STREET ADDRE		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	ST PETERSBURG, FL 33710)	ST PETERSBURG, FL 33710
	01/08/2021		L21000023338
	Date of filing/registration in Flori	da 4.	Document number ()
a)	LEGALCORP SOLUTIONS, LLC		a Dept. of State:
(4)	Registered Agent and Registered Office shown on t	a Dept. of State:	
	3440 W HOLLYWOOD BLVD	. SUITE 415	0
	Registered Office Address (MUST BE FLORII	DA STREET ADDRES.	
	HOLLYWOOD	_{FL} 3302	1
))	Northwest Registered A	Agent LLC	
• /	Enter name of NEW Registered Agent and/or NE	W Registered Office as	ddress:
	7901 4th St N		
	NEW Registered Office Address:		
			
	STE 300		

was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

the article, or organization of the specime	• • •
Mongan Oother	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 this change.

OVER TOTAL GLOVE - Assistant Secretary

Signature of Registered Agent