Division of Corporations



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Division of Corporations

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From:

Account Name : COMPUTERSHARE Account Number : 110432003053 : (561)694-8107 Fax Number : (561)214-8442

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LLC REGISTERED AGENT CHANGE PD TRUST, 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 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: PD TRUST. I	L.L.C		
2. (a)	1020 S. FEDERAL HIGHWAY		(b) 1020 S	S. FEDERAL HIGHWAY
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	102		102	
	DELRAY BEACH, FL 33483		DELR.	AY BEACH, FL 33483
	02/18/2021		1.210000	082655
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	TESKE, LEON E			
(b)	Registered Agent and Registered Office shown on the record 1020 S. FEDERAL HIGHWAY	s of the Flori	da Dept, of	State:
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRES	<u>(S)</u>	
	DELRAY BEACH	. FL <u>33483</u>		 ,
	Corporate Creations Network Inc			2024 A
	Enter name of NEW Registered Agent and/or NEW Register	ered Office a	ddress:	
	801 US Highway I			LED REPLACED
	NEW Registered Office Address:			2024 AUG 1 6 PH 12: 37
	North Palm Beach	FL_33408		·
change agent v was/we	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membericles of organization or the operating agreement of ALA-L.	the register I liability c rs of the lir the limited	red office ompany, i nited liab liability c	and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in
Signa	ture of a member or authorized representative of a member		Vin Duicat	Printed or typed name of signee
I herei provisi the obl to mere notified	by accept the appointment as registered agent and ions of all statutes relative to the proper and compligations of my position as registered agent as providely reflect a change in the registered office address of in writing of this change.	agree to ac ete perforn ided for in . I hereby c	t in this e lance of n Chapter (confirm th	anacity. I further agree to comply with the
1/2	Kevin Duteau, Special	Secretary		
Signatu	re of Registered Agent			