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Florida Department of State

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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 Fax Number : (813)436-5206

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 **BUBBA RENTS D3 LLC**

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FEB 0 9 2024 K. Brumbley

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY & 1 - 5 - 4

To: 18506176383

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.	Na	ame of the limited liability company: BUBBA REN	TS D3 LL	LC	
2.			(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)	
		02/19/2021		L21000084478	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	ZENBUSINESS INC. Registered Agent and Registered Office shown on the records of	the Florida Do	Dept, nt State:	
		336 E. COLLEGE AVE. Registered Office Address (MUST BE FLORIDA STREET)			
		SUITE 301			
		TALLAHASSEE	32301	2024	
	(b)	Northwest Registered Agent LLC Enter name of NEW Registered Agent and/or NEW Registered			<u> </u>
		7901 4th St N			9 ² 7
		NEW Registered Office Address:		: 22	
		STE 300			
		St. Petersburg, FI	<u>33702</u>		
th ag wa	e cha ent v as/wi	imited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the registe iability com of the limite	ered office and the business office of the re npany, it is hereby confirmed that the chang ted liability company or as otherwise provic	egistered ge(s)
	4	ture of a member or authorized representative of a member	Nat S		
1	Signa	ture 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 notified in writing of this change.

Taylor Newman - Assistant Secretary