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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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

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LLC REGISTERED AGENT CHANGE UTG24, LLC

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Page Count	02
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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: UTG24, LLC						
2. (a)	3839 NW BOCA RATON BLVD., SUITE 100 $$	(b)	10960 V	Vilshire Bo	ulevard, 5	th Floor	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u> </u>		Mailing addres		iability comp	
	BOCA RATON, Florida 33431		Los Angeles, CA 90024				
	03/15/2021		L210001	20657	V ş	2821	
3.	Date of filing/registration in Florida	 4.		Document	number 5.		
٥.		••		Document.	اليو در	- E	न्त
5. (a)	SIMON, MICHAEL W Registered Agent and Registered Office shown on the records of the	he Florida l	Dent of State	- -	<i>(</i> 2)	AUG 19 PM	FILEB
		ic riorida i	Apr. or state	.		^{નું} લુ 🔀	~
	3839 NW BOCA RATON BLVD., SUITE 100	Ab Brech			•		-
	Registered Office Address (MUST BE FLORIDA STREET A	<u>1717KE 221</u>					- ວ
	BOCA RATON, FL_	33431		-		y .	
(b)	eResidentAgent, Inc.						
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	-			
	801 US Highway I						
	NEW Registered Office Address:		- 	-			
				-			
	North Palm Beach , FL	33408	}	-			
the cha agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the regist bility cor I the limi	ered office npany, it is ted liabilit	e and the bu s hereby cor y company (siness offic nfirmed tha	ce of the ro it the chan	egistered ge(s)
(ster, Authorized Person			
-	iture of a member or authorized representative of a member			Printed or ty	•	•	
provis the ob- to mer	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided elv reflect a change in the registered office address, I h d in writing of this change	re to act i performa I for in Co pereby co	in this cap nce of my hapter 605 nfirm that	acity. I furt duties, and . 5, F.S. Or, i the limited i	her agree . I am famili f this docu liability co.	to comply far with an ment is be mpany has	with the ed accept ing filed been

Signature of Registered Agent