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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

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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.

agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) 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.    Robin Jones   Printed or typed name of signee	1.	Na	me of the limited liability company.	roperty H	olaings LLC			
Principal office address of limited liability company:  (Nate: MAST BE STREET ADDRESS)  O3/16/2021  L21000123681  3. Date of filing/registration in Florida 4. Document number  5. (a) CRUZ, JUAN  Registered Agent and Registered Office shown on the records of the Florada Dept. of State.  7731 BRACKEN DR  Registered Office Address  MUNIT BE FLORIDA STREET ADDRESS)  PORT RICHEY  PORT RICHEY  FL. 34668  (b) Registered Office Address  MUNIT BE FLORIDA STREET ADDRESS)  Registered Office Address  STE 300  St. Petersburg  F. 33702  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered spent will be identical. Or, in the case of a Florida hinted liability company it is bereby confirmed that the changes swasswere 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 or as etherwise provided in the articles of all statutes relative to the proper and complete performance of any duties, and London familiar with and accept the obligations of my position as registered agent as provided for in Chapter 603. F.S. Or, this document is being filled to writing of this change.  David Next 1. David Next 1. Assistant Secretary	2. (:	1)		(b)			_	
Date of filing/registration in Florida 4. Document number  5. (a) CRUZ, JUAN  Registered Agent and Registered Office shown on the records of the Florida Dept. of State.  7731 BRACKEN DR  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  PORT RICHEY  FI. 34668  (b) Enter name of NEW Registered Agent and/or NEW Registered Office address  Ty901 4th St N  NEW Registered Office Address  STE 300  St. Petersburg  FI. 33702  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the changets) 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.  Robin Jones  Signature of a member to authorized by an affirmative vote of the members of the limited liability company. Robin Jones  Signature of a member to authorized by an affirmative vote of the members of the limited liability company. Robin Jones  Signature of a member to authorized to generate of a member of the first of a member of an administer of a member of			Principal office address of limited liability company:	_	,\	failing address of limited	hability company;	
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