

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.

(((H23000106507 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : REGISTERED AGENTS INC. Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010 **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 **HUMBLE IS GREATNESS INVESTMENTS LLC**

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$25.00 |

Melb ESOS S S AMM T. LEMIEUX

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.

| Principal office address of limited lia (Note: MUST BE STREET A | bility company: | | (b) Mailing address of limited liability con (Note: MAY BE POST OFFICE B | | | | |
|--|-----------------|----------------|--|------------|-----------|------------|----------|
| 7901 4th St N STE 300 | , | | 7901 | 4th St N | - | | <u> </u> |
| St. Petersburg FL 33702 | - | | St. Pe | tersburg F | L 33702 | | |
| 04/10/21 | | | L210 | 00167 | 197 | | |
| Date of filing/registration in | Florida | 4. | | | ıı number | | |
| kamara, mohamed | | | | | | | |
| Registered Office Address (MEST RE E) | ORIDA STREET | ADDRES | | | | | |
| Registered Office Address (MUST BE F1 12035 NE 2ND AVE #A422 MIAMI | • | | | | | | |
| 12035 NE 2ND AVE #A422 MIAMI | f | | | | | | |
| 12035 NE 2ND AVE #A422 | . F | ı. <u>3316</u> | 1 | | W. | 2023 | |
| 12035 NE 2ND AVE #A422 MIAMI Registered Agents In | . F | ı. <u>3316</u> | 1 | | | 2023 Kin 2 | |
| MIAMI Registered Agents In Enter name of NEW Registered Agent and/o 7901 4th St N NEW Registered Office Address: | . F | ı. <u>3316</u> | 1 | | ₩. | K12.21 | |
| 12035 NE 2ND AVE #A422 MIAMI Registered Agents In Enter name of NEW Registered Agent and/o 7901 4th St N | . F | ı. <u>3316</u> | 1 | | i kalan | | £. C: |

the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member **ROBIN JONES** 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 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.

David Roberts - Assistant Secretary

Signature of Registered Agent