Florida Department of Star

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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 : (855)330-1010

the email address for this business entity to be used for future amount report mailings. Enter only one email address please.**

LLC REGISTERED AGENT CHANGE S & V MULTISERVICES LLC

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JUN 2 3 2023

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.

2. (a) Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS) O4/26/2021 Date of filing/registration in Florida Date of filing/registration in Florida URS AGENTS. LLC Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 3458 LAKESHORE DR. Registered Office Address TALLAHASSEE FI. 32312 (b) Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered Office address: T901 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 at the change or changes are made, the Florida street address of the registered office and the business office of the registered office and the business office of the registered office and the business office of the register authorized by an affirmative vote of the members of the limited liability company, it is hereby confirmed that the change or changes are made, the Florida street address of the registered office and the business office of the registered of the articles of organization or the operating agreement of the limited liability company. Robin Jones Signature of a member or authorized representative of a member Printed or typed name of signee	1. N	ame of the limited liability company: S & V MultiServic	es LLC							
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I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply we provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is bein to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has be notified in writing of this change.	provisi the obl to mero notifice	ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d'in writing of this change.	perform d for in hereby o	ct in nan Chi conj	this capa ce of my o apter 605, firm that i	ucity. I furth luties, and I , F.S. Or, if the limited li	ter agree i am famili this docus ability cos	to con ar wit ment i mpany	iply with h and a s being v has be	h the eccept filed en
David Roberts - Assistant Secretary Signature of Registered Agent	- 		ecretary							