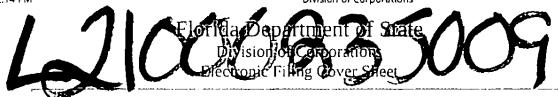
Division of Corporations



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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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1/25/2024 11:24:51 PST . To 18506176383 Page: 2/2 From: Registered Agents Inc Fax: 8134365206

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 hability 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.	OP 3 LLC	
2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: <u>(Note: MAY BE POST OFFICE BOX)</u>
	05/20/21		00235009
3.	Date of filing/registration in Florida	4.	Document number
5. (a	Bussie, Goodwin		
(b)	Registered Agent and Registered Office shown on the records of		, of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		2024
	5717 BESSIE DR		
	SARASOTA	34233	
	Northwest Registered Agent LLC Enter name of NEW Registered Agent and/or NEW Registered Office address:		2024 JAN 25 PH 3: 37 SECTION OF STATE SECTION OF STATE
	7901 4th St N		
	NEW Registered Office Address		
	STE 300		<u></u>
	St. Petersburg , FI	33702	
the chagent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members cicles of organization or the operating agreement of the	f the registered ability compa of the limited	d office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
I here provis the ob- to mei	thy accept the appointment as registered agent and ageins of all statutes relative to the proper and complete digations of my position as registered agent as provide elv reflect a change in the registered office address. It is a change in the registered of the change of this change. Taylor Newman - Assistant S	r performance ed for in Chap hereby confir	his canacity. I further agree to comply with the
Signat	ure of Registered Agent	•	