121000251571

| (| Requestor's Name) |
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| | Address) |
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| (| City/State/Zip/Phone #) |
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| | (Business Entity Name) |
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| (| Document Number) |
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| Certified Copies | Certificates of Status |
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| Special Instructions to | Filing Officer: |
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Office Use Only



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2022FEB -2 FH 9: 08

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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312
(850) 656-4724

| DATE 02/02/2022 | | | ******* |
|-------------------------|--|------------------------|-------------|
| 0011711 | | | ₩ALK IN |
| ENTITY NAME SOUTH | ERN CAT USA, LLC | | |
| - | · | | |
| OOCUMENT NUMBER_L | 21000251571 | | |
| | **PLEASE FILE THE | ATTACHED AND RETURN** | |
| | Plain Copy | | |
| | Certified Copy | | |
| | Certificate of Status | | |
| | Certified Copy of Arts & Certificate of Good Standi | | |
| | **APOSTILLE' / NO | TARIAL CERTIFICATION** | |
| COUNTRY OF DESTINATION | DN | | |
| NUMBER OF CERTIFICATI | ES REQUESTED | | |
| TOTAL OWED \$25.00 | | ACCOUNT #: I201600 | 00072 |
| | | SRYM | í |
| Please call Tina at the | | | |

COVER LETTER

| TO: Registration Section Division of Corporations | | | | | |
|--|--|--|--|--|--|
| SUBJECT: SOUTHERN CAT USA, LLC | С | | | | |
| Name of I | Limited Liability Company | | | | |
| Dear Sir or Madam: | | | | | |
| The enclosed Registered Agent/Registered Office Ch | nange and fee(s) are submitted for filing. | | | | |
| Please return all correspondence concerning this mat | eter to the following: | | | | |
| L. Ferrell | | | | | |
| Name of Person | | | | | |
| Harbor Compliance | | | | | |
| Firm/Company | | | | | |
| 1830 Colonial Village Lane | | | | | |
| Address | | | | | |
| Lancaster, PA 17601 | | | | | |
| City/State and Zip Code | | | | | |
| professional@harborcompliance.com | | | | | |
| E-mail address: (to be used for future annual re | port notification) | | | | |
| For further information concerning this matter, please | e call: | | | | |
| Harbor Compliance | 717 , 459-9173 | | | | |
| Name of Person | Area Code & Daytime Telephone Number | | | | |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: | | | | |
| Registration Section | Registration Section | | | | |
| Division of Corporations | Division of Corporations | | | | |
| Clifton Building | P.O. Box 6327 | | | | |
| 2661 Executive Center Circle Tallahassee, Florida 32301 | Tallahassee, Florida 32314 | | | | |
| Enclosed is a check for the following amou | int: | | | | |
| \$25 Filing Fee | □ \$55 Filing Fee & Certified Copy | | | | |
| INHS18 (2/14) | | | | | |

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: SOUTH | ERN | CAT L | JSA, LLC | | |
|------------------------------|---|--|---|---|-----------------------|---------------------------------------|
| 2. (a) | | | (b) | | | |
| . , | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | | Mailing address of li (Note: MAY BE | | |
| | 1827 W 27TH ST | | 1827 W | √ 27TH ST | 007 07 | <u> </u> |
| | PANAMA CITY, FL 32405 | | PANAMA CITY, FL 32405 | | | |
| | 05/28/2021 | | L210002 | 251571 | | |
| 3. | Date of filing/registration in Florida | 4. | | Document numb | oer | |
| 5. (a) | | | | | | |
| | Registered Agent and Registered Office shown on the records of | the Flori | da Dept. of State | 2: | | |
| | BYERS, MICHAEL | | | - | | |
| | Registered Office Address (MUST BE FLORIDA STREET) | ADDRE. | <u>SS)</u> | | | |
| | 1816 W 27TH ST | | | _ | | |
| | PANAMA CITY , FL | 3240 | 5 | | 2022 | |
| (b) | Registered Agents Inc. | | | 7. | 2022 FEB - | , , , , , , , , , , , , , , , , , , , |
| | Enter name of NEW Registered Agent and/or NEW Registered | Office a | ddress: | • • | \sim | |
| | 7901 4th St N | | | | fi : o. | |
| | NEW Registered Office Address: | _ | | • | 08 | |
| | STE 300 | | | | | |
| | St. PetersburgFL | 3370 |)2 | | | |
| the cha agent v was/wa | imited liability company is not organized under the law inge 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 cles of organization or the operating agreement of the | ws of the the regulation the regular to the line with the line was a second to the line was a se | e State of Flo istered office company, it is nited liability | and the business hereby confirmation or as | s office ed that t | of the registered the change(s) |
| <u>/s/</u> | Jennifer Hoyal | Je | nnifer Hoya | al | | |

Signature of a member or authorized representative of a member 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 to 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.

Assistant Secretary

Signature of Registered Agent

Bill Havre