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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 305698 84268

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: February 2, 2024

ORDER TIME: 12:43 PM

ORDER NO. : 305698-007

CUSTOMER NO: 8426885

CHANGE OF AGENT

NAME: SS MARINE GROUP LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

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.	Na	me of the limited liability company:	ROUP L	LC	.C ————————			
2. (a)			(b)	b)			
`	, .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of lin		Mailing address of limited liabil (Note: MAY BE POST OFF	mited liability company:		
		622 NORTH FLAGLER DRIVE 1002			622 NORTH FLAGLER DRIVE 100	2		
		WEST PALM BEACH, FL 33401 UN	_		WEST PALM BEACH, FL 33401 UI	٧		
		06/01/2021			L21000254344			
3.		Date of filing/registration in Florida	4.	-	Document number			
5. ((a)							
,	(4.)	Registered Agent and Registered Office shown on the records of SHULMAN, ALAN			a Dept. of State:			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<u></u>			
	622 NORTH FLAGLER DRIVE			TAL	124			
		WEST PALM BEACH FL	33401		LAHASSET	2024 FEB -		
ľ	b) _					-5 -5		
`		Enter name of NEW Registered Agent and/or NEW Registered	Office a	ıdd	ddress:	=	\bigcup	
	Corporation Service Company			LORIDA	AH 11: 39			
		NEW Registered Office Address:						
		1201 Hays Street						
		Tallahassee	32301					
		, FL						
char ager was/	ige it w /we	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lia- re authorized by an affirmative vote of the members of the of organization or the operating agreement of the	register ability confidence	rec on mi	ed office and the business office of the ompany, it is hereby confirmed that the nited liability company or as otherwise	e regis e chan	itered ige(s)	
/s/	Dav	vid Shulman	DA	٩V	VID SHULMAN, Manager			
Sig	gnati	ure of a member or authorized representative of a member			Printed or typed name of signe	e		
prov the o	risio Obli _e re	y accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address. I h	ee to ac perforn d for in hereby c	et i nai Cl cor	in this capacity. I further agree to co ance of my duties, and I am familiar w Chapter 605, F.S. Or, if this documen onfirm that the limited liability compa	mply with an t is be ny ha:	with the id accept ing filed s been	
nou	nea <u></u>	of this change. Crack E. Kirby, Asst. Vice President Grack E. Kirby.						

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00