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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone

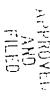
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Of \*Enter the email address for this business entity to be used for future -annual report mailings. Enter only one email address please.\*\*

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## LLC REGISTERED AGENT CHANGE VALORTEC LLC

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10/12/2023 09 28:54 PDT . 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.

Na	me of the limited liability company.			
(a)		(b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited hability company (Note: MAY BE POST OFFICE BOX)	:
	06/08/21	L210	1000271747	
	Date of filing/registration in Florida	4.	Document number	
(a)	MEEHLE. SUZANNE D. ESO.			
(a)	Registered Agent and Registered Office shown on the records of t			
	1215 E CONCORD STREET			
	Registered Office Address <u>(MUST BE FLORIDA STREET)</u>	(DDRESS)		
	<del></del>		2	
	ORLANDO, FL	32803	PILI 2023 OCT 1 2	<u>[t-</u>
	Northwest Registered Agent LLC		7 FA	_ <del>`</del>
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address		
	7901 4th St N		PH 6: 06	
	NEW Registered Office Address:		·· o	
	STE 300			
	St. Peterspurg	33702		
e cha ent v is/we e arti	imited liability company is not organized under the layinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	ws of the State the registere ability compared the limited	nte of Florida, it is hereby confirmed that aftered office and the business office of the regis bany, it is hereby confirmed that the change() d liability company or as otherwise provided offity company.	tere s)
/_ Signa	ture of a member of authorized representative of a member		Printed or typed name of signee	
herei ovisi e obl mere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. If it writing of this change.	performance d for in Chap hereby confu	w of my dubes, and I am tamiliar with and a	ccc
_/:	Taylor Newman - Assistant St	ecielary		