Fax: 8134365206

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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 SHELLYEAH-SPF30A LLC

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M. SOLOMON

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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.	Ni	ame of the limited liability company:	30A LLC					
2.	(a)		(l))				
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
								
•		06/22/21	- ,	L21000289				
.3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	***************************************						
		Registered Agent and Registered Office shown on the records of the	he Floridi	i Dept. 61 Sta	ite.			
		1150 Nw 72nd Ave Tower I Ste 455			_	;	~ 2	
		Registered Office Address	DDRES!	<u> </u>			(1) (1)	
					_	: .	- ;	:
		Miami FL_	33126					• •
	(b)	Registered Agents Inc			_	•	-: -: ::	
		Enter name of NEW Registered Agent and/or NEW Registered of	Office ad	<u>dress</u> :			:. ()	
		7901 4th St N			_			
		NEW Registered Office Address:						
		STE 300			<u> </u>			
		St. Petersburg	33702					
the ag wa the	e cha ent v is/we e arti	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 icles of organization or the operating agreement of the l	the regi bility co f the lin limited	stered offic ampany, it aited fiabili	te and the business of is hereby confirmed ty company or as oth	ffice of that the terwise p	the regi change(stered s)
I) pr the	herel ovixi v obl mere	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I he if in writing of this change.	ce to ac perform I for in (cereby c	t in this cap ance of my Chapter 60 onfirm thai	pacity. I further agreed duties, and I am Jan 15, F.S. Or, if this do t the limited liability	e to con uliar wi cument compan	nply wit th and c is being y has be	h the iccept filed en

- Assistant Secretary

David Roberts

Signature of Registered Agent