L21000396302

(Requestor's Name)					
(Nequestor 5 Harrie)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Special Instructions to Filing Officer: J. HORNE OCT 13 2022					
2022					
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Office Use Only



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	10/12/2022	
Name:	Merritt Walker	_
	e #:1795030	_
		MANAGEMENT COMPANY LLC
☐ Art	icles of Incorporation/Authorization	to Transact Business
☐ Am	nendment	
✓ Ch	ange of Agent	
☐ Re	instatement	
☐ Co	nversion	
☐ Me	erger	
☐ Dis	ssolution/Withdrawal	
☐ Fic	titious Name	
Oth	ner	,
Authorize	d Amount: \$25	
Signature	:mw	

F: 800.944.6607



115 N CALHOUN ST., STE. 4 TALLAHASSEE. FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	10/12/2022	
	Merritt Walker	_
Reference	#:1795030	_
		MANAGEMENT COMPANY LLC
Artic	eles of Incorporation/Authorization	to Transact Business
☐ Ame	endment	
✓ Chai	nge of Agent	
☐ Rein	estatement	
Con	version	
☐ Merç	ger	
☐ Diss	olution/Withdrawal	
☐ Fiction	tious Name	
☐ Othe	er	are re-
Authorized	Amount: \$25	
Signature:	mw	

F: 800.944.6607

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:CONTINUUN	/I VEN	TURES M	ANAGEMENT COMPANY LLC	
2.	(a)		(b)		
	. =: \$	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		No Change	_	No Chan	nge	
		June 28, 2021	_	Li	21000296302	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	UNIVERSAL REGISTERED AGENTS, INC.				
	(,	Registered Agent and Registered Office shown on the records of th	re Florida	Dept, of State	:	
		1317 CALIFORNIA STREET				
		Registered Office Address	<u>DDRESS,</u>			
		TALLAHASSEE FL_	32304		≅.c. 2 6	
	(b)	COGENCY GLOBAL INC.			COZZ OCT SECRE I.	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office add	ress:	T 12	
		115 North Calhoun St., Suite 4				
		NEW Registered Office Address:				
					39 3	
		Tallahassee FL	32301		-1	
the ago wa	cha ent v s/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lialere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	he regis bility co the lim	tered office mpany, it is ited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
/s/ Julie Gracz			Julie	Gracz		
- 8	igna	ture of a member or authorized representative of a member			Printed or typed name of signee	
pro the to	wisi obl ngre	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I ha I in writing of this change.	e to act performa for in (, ereby co	in this cape ince of my o hapter 605, ufirm that t	icity. I further agree to comply with the luties, and I am Jamiliar with and accept . F.S. Or, if this document is being filed he limited liability company has been	

/s/ Sean Honan

Signature of Registered Agent